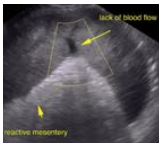
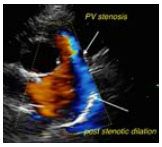
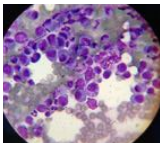
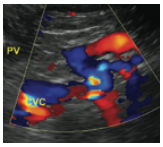

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PATIENT

Beau Omrod

SPECIES

Canine

BREED

Pointer Mix

SEX

Neutered male

AGE

8 years

WEIGHT

96 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Leal

HOSPITAL NAME

Animal Care Center of Landing

REFERRING VET

Dr. Villari

INVOICE

46723

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8/23/23

PRESENTING CLINICAL SIGNS

History: Weight loss, inappetence, diarrhea (for one month).
Metronidazole, novel protein (Turkey) diet. Currently on metronidazole, telemesartin. Bloodwork WNL (except ALKP = 685)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. A trace amount of sand was noted in the bladder. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The prostate was enlarged, irregular and mineralized. The prostatic urethra was also mineralized. The prostate measured 2.6 cm.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralization was noted. The right kidney measured 8.47 cm. The left kidney measured 6.93 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.57 cm at the caudal pole and 0.62 cm at the cranial pole. The right adrenal gland measured 2.23 cm at the cranial pole and 0.79 cm at the caudal pole.

Spleen

The **spleen** was slightly enlarged with minor, hypoechoic heterogenous parenchymal changes. This is likely reactive spleen with the potential of comorbidities of prostatic and round cell neoplasia.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

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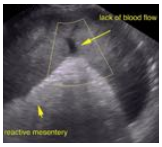
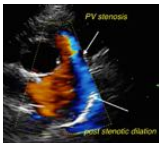
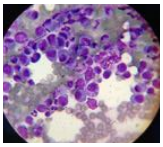
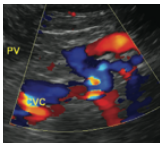

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Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

Free Abdomen

A hypoechoic, 1.8 cm renal lymph node was noted adjacent to the left renal artery. The iliac lymph nodes were enlarged and strongly suggestive for metastatic disease.

ULTRASONOGRAPHIC FINDINGS

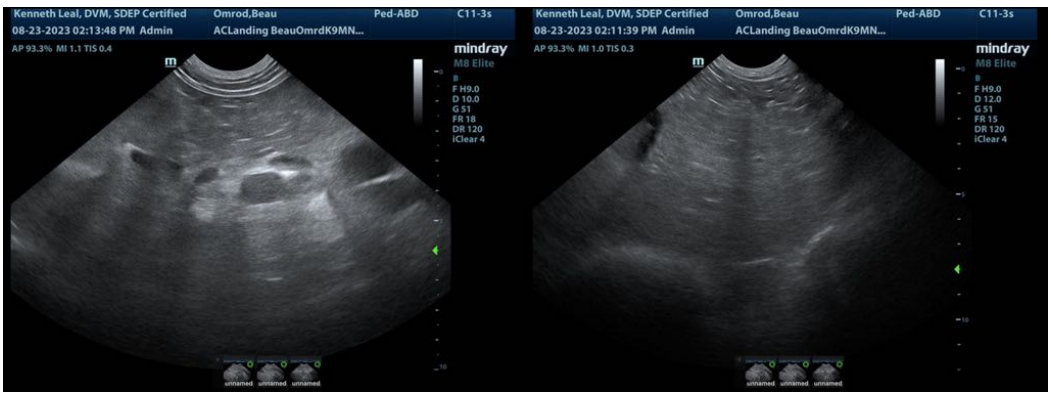
Enlarged, mineralized prostate and mineralized prostatic urethra with iliac lymphadenopathy.

Enlarged spleen with heterogenous hypoechoic parenchymal changes.

Structurally GI tract is unremarkable; however, the prostate, spleen and lymph nodes are of primary concern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a strong concern for prostatic neoplasia/carcinoma. Ultrasound-guided FNA of the spleen and prostate are recommended. The lymph nodes are too small to safely sample in this patient; however, the prostate and spleen should be sampled.



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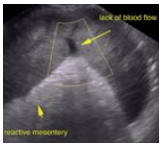
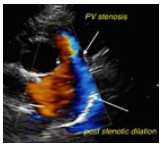
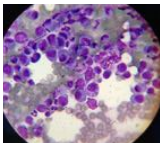
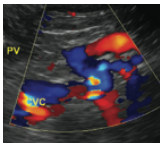

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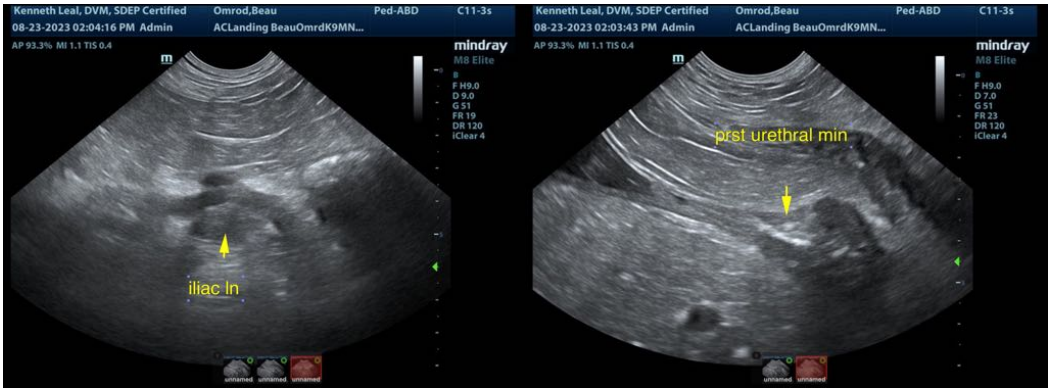

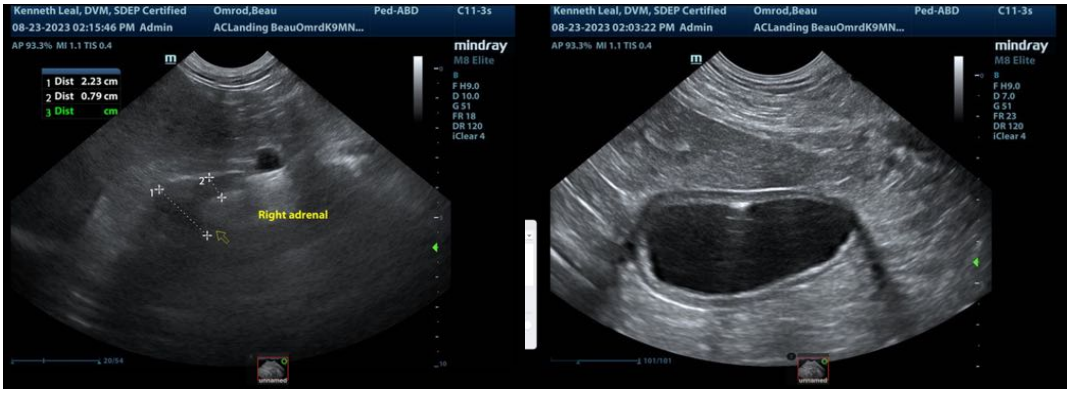

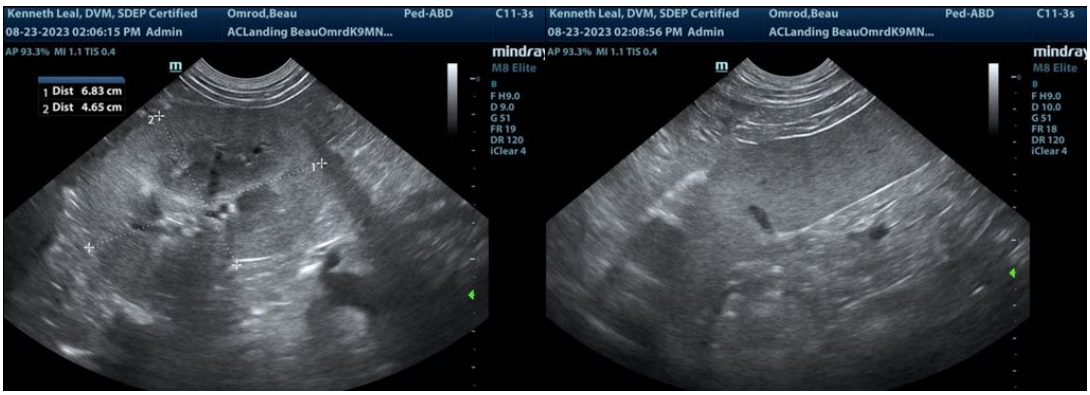

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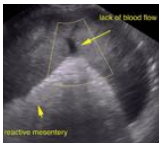
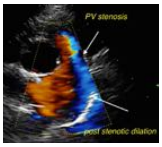
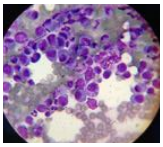
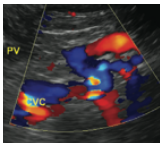

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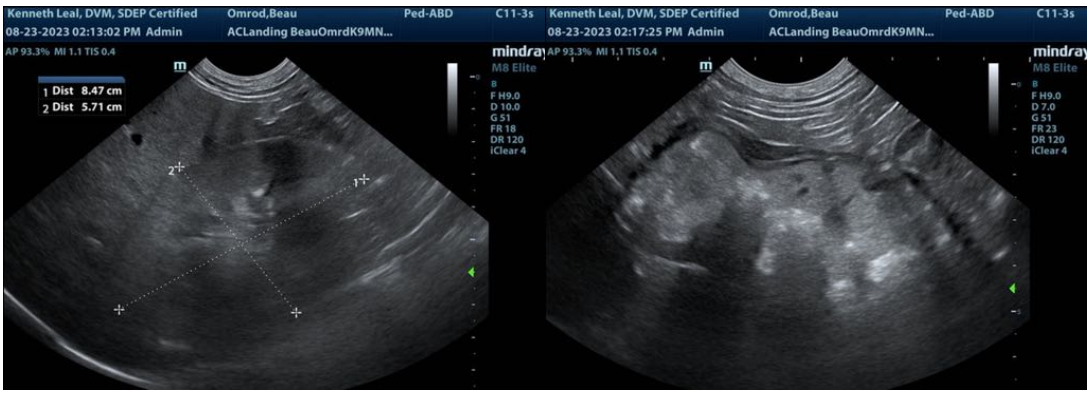

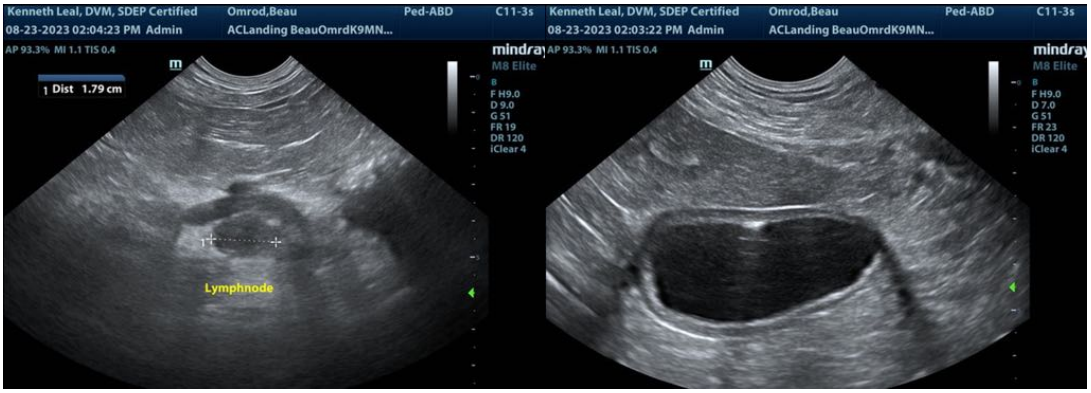

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com