



PATIENT

Casino Conaway

PRESENTING CLINICAL SIGNS

SPECIES

Canine

Chief Concern / Provisional Diagnosis: ~hx penile discharge, licking at penis, hematuria - concern for prostatic disease vs other ~ Relevant Medical History and Physical Exam findings: penile tip w/ erythema/inflammation. prepuceal dermatitis (mild) PE overall otherwise unremarkable Recent Diagnostics: Relevant Laboratory Results / Abnormalities: ~UA pending ~ Current medications (include full name, dosage and frequency): ~none~ Relevant Radiograph Findings(email radiographs if available): ~prostatomegaly w/ no evidence of urolithiasis

BREED

Dachshund Long
Haired

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Intact Male

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

AGE

7 Years 6 Months

The prostate is large, measuring 3.72 cm in height on the sagittal view. It is slightly irregular, heterogeneous and hyperechoic with small parenchymal cysts.

WEIGHT

36 Pounds

The left kidney has a normal shape and size (5.5 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (4.7 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

Adrenal Glands

The left adrenal gland is normal in size measuring 0.41 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

IMAGING BY

Loetitia Saint-Jacques,
LVT

The right adrenal gland is normal in size measuring 0.62 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

HOSPITAL NAME

MountainView AH

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

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Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

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Casino Conaway The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

SPECIES

Canine

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

BREED

Dachshund Long
Haired

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Duodenum wall measured 0.51 cm. Jejunum wall measured 0.37. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

SEX

Intact Male

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

AGE

7 Years 6 Months

Pancreas

The pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

WEIGHT

36 Pounds

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There are occasional prominent mesenteric lymph nodes visualized. The left sublumbar lymph node measures 1.2 cm.

INTERPRETED BY

Kathleen Sennello DVM,
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(Small Animal Internal
Medicine)

Other

A brief view of the heart was submitted. No significant pericardial effusion was seen.

The left and right testicles are visualized and appear normal. The left testicle measures 3.7 cm. The right testicle measures 3.3 cm.

IMAGING BY

Loetitia Saint-Jacques,
LVT

There is an ill-defined, hyperechoic area of tissue in the right cranial quadrant of the abdomen. This is most consistent with an area of hyperechoic/inflamed adipose tissue (possible early bates body?). Recommend continued monitoring or possibly a fine needle aspirate if there is concern.

HOSPITAL NAME

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ULTRASONOGRAPHIC FINDINGS

- Large, hyperechoic, heterogeneous prostate with small parenchymal cysts – Findings are most consistent with benign prostatic hypertrophy +/- prostatitis. Neoplastic change is thought unlikely, but cannot be ruled out. Recommend urinalysis and culture.
- Prominent sublumbar lymph node – This is likely reactive secondary to the large prostate, but recommend continued monitoring.

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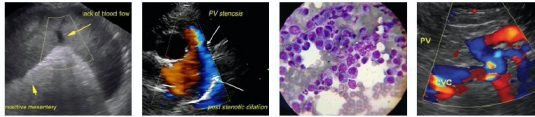
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- Area of hyperechoic, ill-defined tissue in the right cranial quadrant of the abdomen – Suspect focal inflammation of fat or a lymph node. Recommend continued monitoring with ultrasound. If there is evidence of progression or change, consider a fine needle aspirate.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes observed in the prostate are most consistent with benign prostatic hypertrophy +/- prostatitis. Recommend neutering in addition to urinalysis and culture.

BREED

Dachshund Long Haired

There are some prominent lymph nodes in the sublumbar area that are likely more reactive, but should be monitored. If there is lymph node enlargement or change, this would be more concerning.

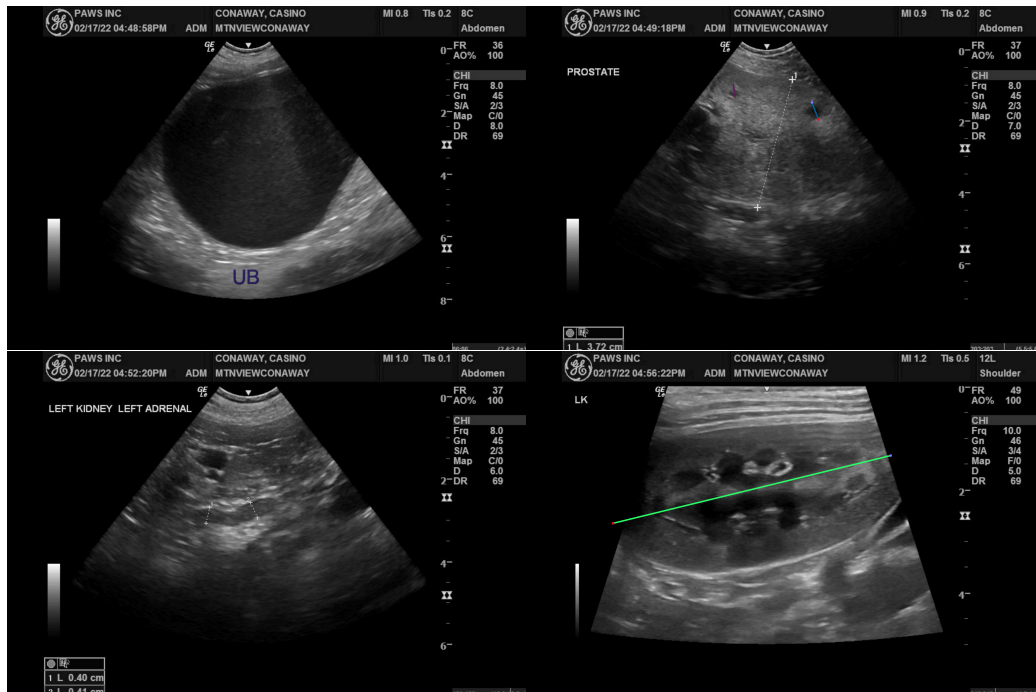
SEX

Intact Male

Additionally, there is an area of hyperechoic tissue in the right cranial abdomen, which I suspect is incidental and associated with some focal inflammation of fat, etc., but recommend continued monitoring to ensure this does not get larger or more defined, as a fine needle aspirate may need to be considered.

AGE

7 Years 6 Months



WEIGHT

36 Pounds

INTERPRETED BY

Kathleen Sennello DVM, MS, Diplomate ACVIM (Small Animal Internal Medicine)

IMAGING BY

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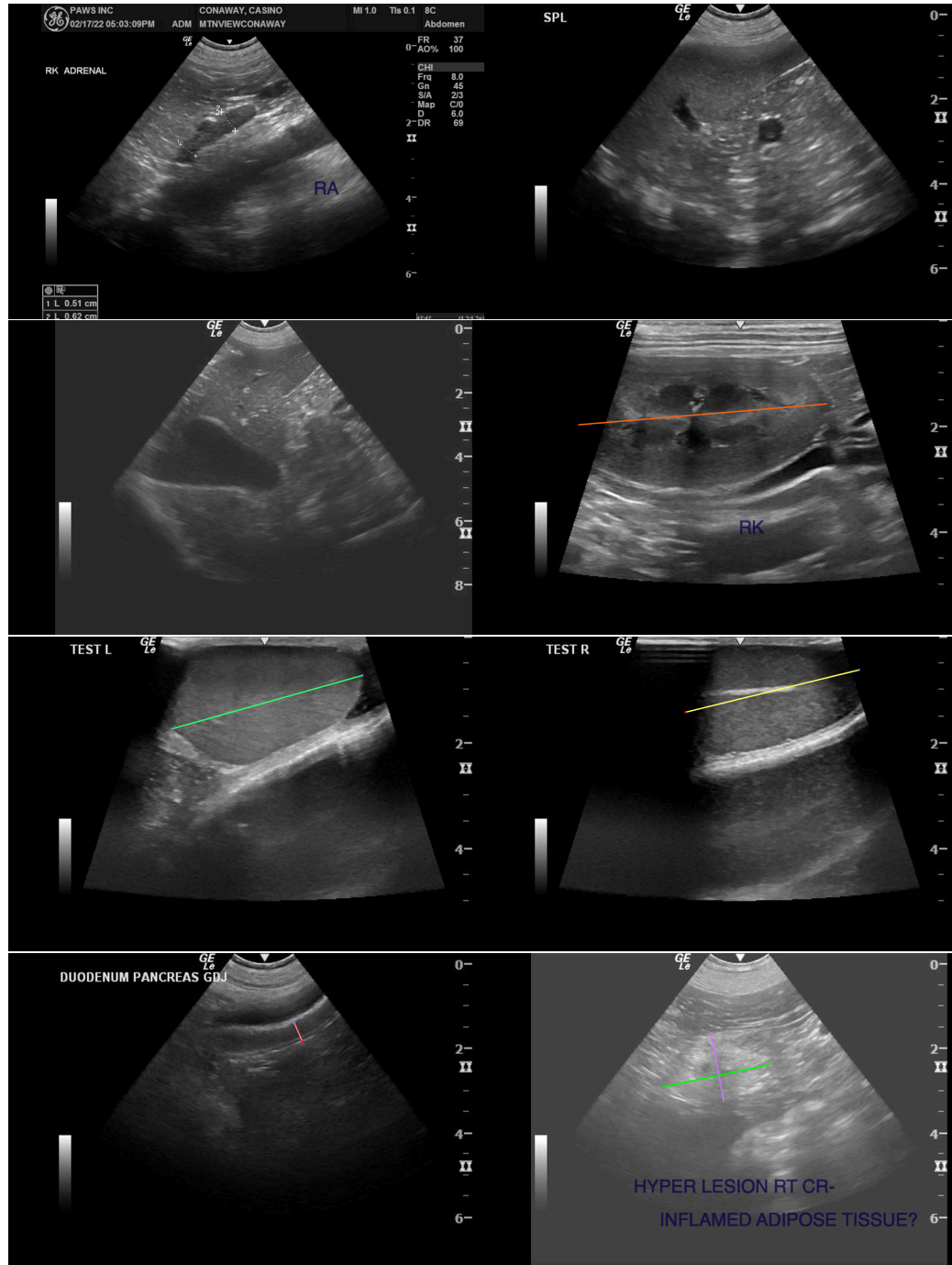
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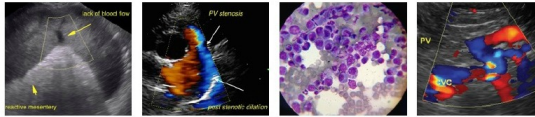
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Portable Animal Western Sonography, Inc.

IMAGING PERFORMED BY
pawsonography@gmail.com  530-786-8340

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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.

SPECIES

Canine

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.

BREED

Dachshund Long
Haired

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)
kathleen.sennello@sonopath.com

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