

PATIENT

Oso Benner

SPECIES

Canine

BREED

Shih Tzu

SEX

Intact Male

AGE

10 Years

WEIGHT

23 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Meghan Myers

HOSPITAL NAME

Hershire AH

REFERRING VET

Dr. Meghan Myers

INVOICE

37390

DATE

5/4/22

PRESENTING CLINICAL SIGNS

pet has history of right sided perineal hernia, is intact and was recently treated for UTI. Has enlarged prostate on xray. Pet now has soft tissue swellings bilaterally around rectum and is having tenesmus. Suspect the tenesmus is from feces getting "caught" in in the right sided hernia. Unsure if hernia on left side causing swelling on that side. Ultrasound focus is just bladder/prostate. Did put probe on the swelling to left of anus- fluid filled? Goal is to rule out obvious prostate neoplasia and then refer for surgeon consult for perineal hernias.

Abnormal PE/Chem/CBC/UA Results: moderate chronic azotemia and proteinuria

LIMITED ULTRASONOGRAPHIC EXAMINATION

The urinary bladder was not fully imaged. The cysto-urethral junction is visualized and proximal urethra, which appears relatively normal and free of any mass lesions or stones. The urethra appears deviated by hyperechoic tissue, and the prostate is not clearly visualized. No overtly abnormal tissue seen, but visualization is greatly impeded by the intrapelvic nature, gas in the colon, and severely hyperechoic mesentery due to localized inflammation. There is a large amount of free, mildly echogenic fluid visualized in what is suspected to be the region of the perineal hernia(?), most consistent with severe inflammation, infection, less likely urine leakage.

ULTRASONOGRAPHIC FINDINGS

- Severe intrapelvic inflammation and fluid-findings could be consistent with an abscess, inflammation secondary to trauma/necrosis (trapped in hernia) or even a neoplastic effusion.
- Perineal hernia(s)

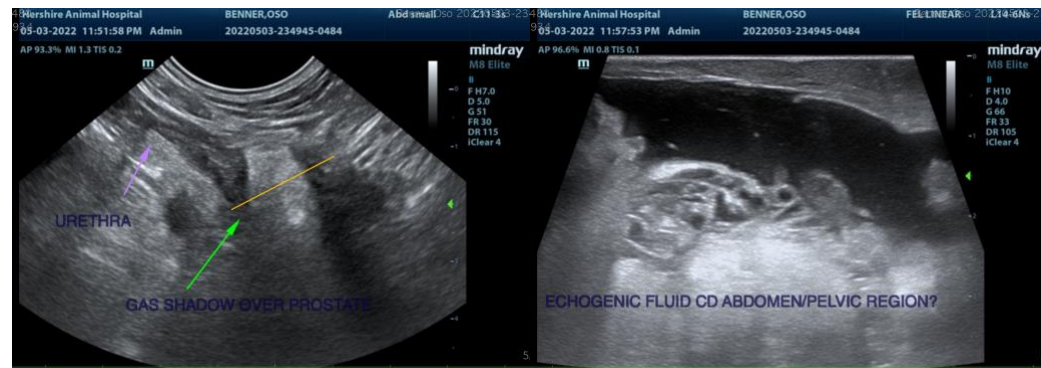
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately the prostate could not be seen due to the sever shadowing inflammation, gas, etc. present. I am concerned about the severity of the inflammation in this region and the fluid present.

Consider sampling and drainage of the fluid with cytology and aerobic/anaerobic cultures.

Consider a contrast CT scan to better evaluate this area or even a contrast cystourethrogram may help to identify the location of structures.

Ideally recommend referral to a veterinary surgeon (ASAP) for further advanced diagnostics and repair of the perineal hernia. The prostate may need to be evaluated (biopsied) at that time.





PATIENT

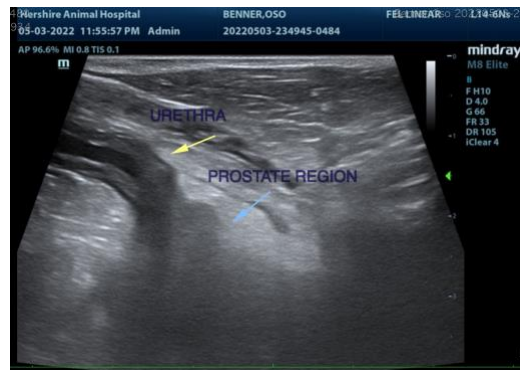
Oso Benner

SPECIES

Canine

BREED

Shih Tzu



SEX

Intact Male

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.

AGE

10 Years

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.

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

WEIGHT

23 Pounds

kathleen.sennello@sonopath.com

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Meghan Myers

HOSPITAL NAME

Hershire AH

REFERRING VET

Dr. Meghan Myers

INVOICE

37390

DATE

5/4/22