**DATE PRESENTING CLINICAL SIGNS**

7/17/23

Patient presented for hematuria starting on 5/20/23 with no apparent stranguria or pollakiuria. He has been eating/drinking and acting normally otherwise. Initially was prescribed a 7-day course of amoxicillin, which changed urine color from dark red to light orange, but never fully resolved. It has since returned to dark red color. Additional antibiotic administration has not shown the same improvement as before.

PATIENT

Champ Allers

SPECIES

Canine

BREED

German Shepherd

Current Medications: Amoxicillin 500 mg 1 capsule PO BID.

Lab Results: Very mild neutrophilia (12.60), range 2-12, Thrombocytopenia (140), range 175-500

Urinalysis nsf. Urine culture – negative.

Radiographs: NSF.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Patient sedated with Dexdomitor.

Stat Report: Not requested.

Imaging Performed By: Andi Parkinson, BS, RDMS.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Neutered Male

Urinary System

The urinary bladder is distended with a large amount of extremely echogenic urine. In the dorsal wall of the urinary bladder, there is a small hyperechoic, irregular area of material measuring approximately 2.74 cm x 0.93 cm, most consistent with adhered debris or soft tissue. There is minimal uptake on color flow. The 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

9/12/12

WEIGHT

96 Pounds

The prostate is normal in size (1.1 cm) and shape for this neutered male dog. The parenchyma is homogenous, and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect, or calculi.

INTERPRETED BY

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

The left kidney has a normal shape and size (8.5 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

HOSPITAL NAME

Everhart Vet Hospital

The right kidney is large and irregular in shape and size, measuring greater than 9.8 cm. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. In the cranial pole of the right adrenal, there is a large irregular mixed echogenicity expansile mass effect measuring greater than 11.26 cm x 7.03 cm. Concerning for primary renal mass. There is some surrounding inflammation noted.

REFERRING VET

Dr. Kerr

PRIMARY FINDINGS**INVOICE**

10336

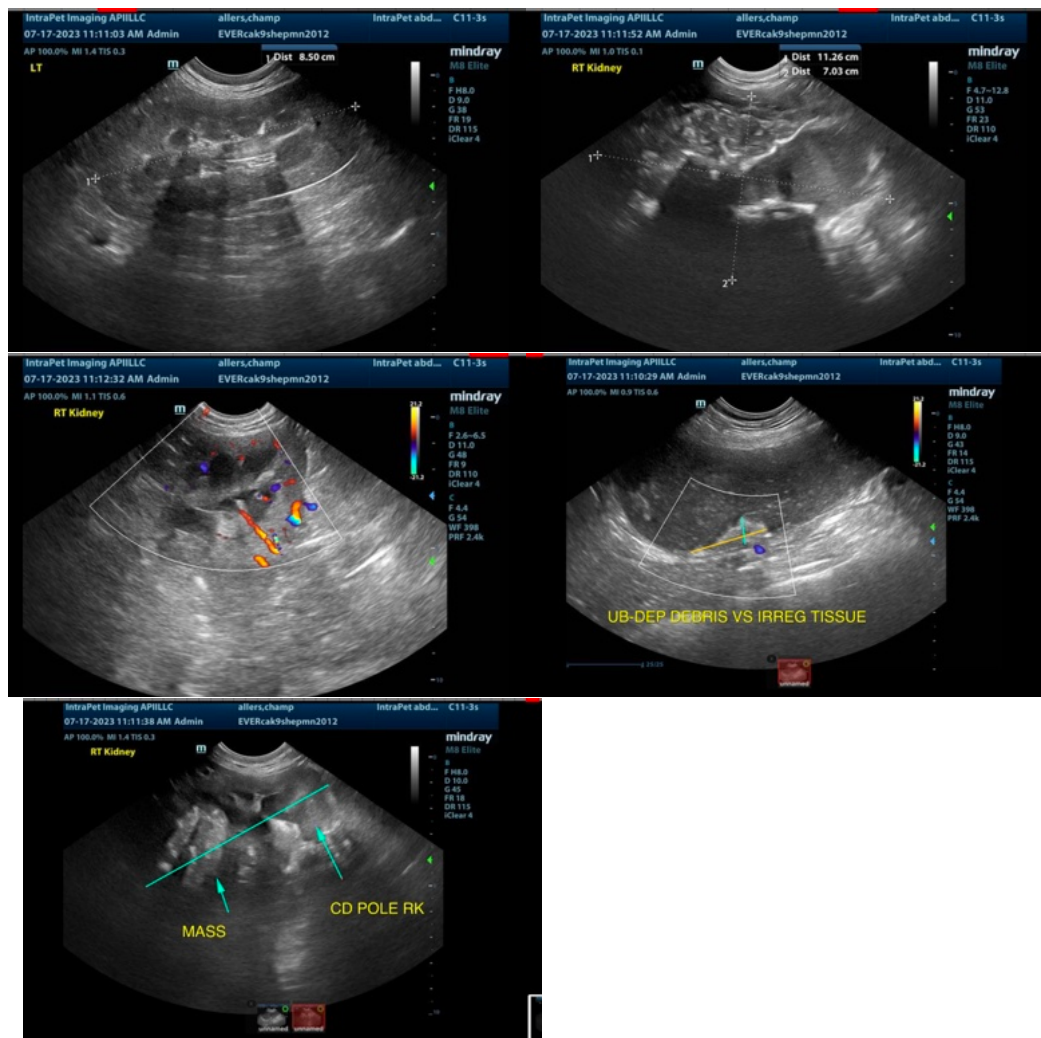
- Echogenic debris in the urinary bladder. The echogenic debris in the bladder lumen could be consistent with cells, crystals, and/or mucus. Recommend urinalysis and culture.
- Questionable soft tissue lesion or adhered echogenic debris in the urinary bladder.

- Large, irregular expansile mass effect associated with the right kidney. Neoplasia would be the primary differential including carcinoma, hemangiosarcoma, lymphoma, other. Other differentials exist.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

In the region of the right kidney there is a large, irregular expansile appearing mass effect, which appears to be rising from the cranial pole of the right kidney or the region of the right kidney. This is a likely source of the hematuria reported. Recommend a fine needle aspirate and a contrast CT scan to evaluate for surgical removal.

There is some abnormal tissue visualized associated with dorsal wall of the urinary bladder this has minimal color flow so is likely adhered debris, but a mass effect cannot be ruled out.



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.

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