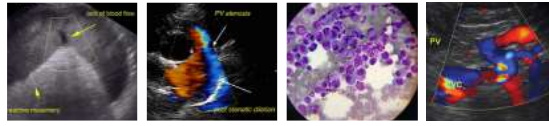




PATIENT	PRESENTING CLINICAL SIGNS
Knuckles Pearson	Keeps getting constipated about 2 months now. Abdominal Pain.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.
Minature Pinscher	
SEX	The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate appeared to mild impinge upon the adjacent ventral colon. The prostate measured 4.0 cm x 3.1 cm. A focal parenchymal cyst was present.
Intact Male	
AGE	Focal, mildly prominent yet isoechoic medial iliac lymph node exhibiting normal width to length ratio (<0.5), was present measuring 0.56 cm in diameter.
7 years	
WEIGHT	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pyelectasia in either the left or right kidneys. Focal right kidney medullary mineral was noted. The left kidney measured 4.8 cm in length. The right kidney measured 5.1 cm in length.
21.2 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.1 cm length x 0.57 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.9 cm length x 0.42 cm width at the caudal pole.
IMAGING PERFORMED BY	Spleen
Jenna Walsh, CVT	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.
HOSPITAL NAME	Liver/ Gallbladder
Linn VH	
REFERRING VET	
Dr. Braat	
INVOICE	
12349	
DATE	
10/12/21	



PATIENT	normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
Knuckles Pearson	
SPECIES	<i>Gastrointestinal</i>
Canine	The stomach presented intact wall layering with a normal wall layer ratio with minor echogenic nonshadowing ingesta present.
BREED	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.
Minature Pinscher	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
Intact Male	The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.
AGE	<i>Free Abdomen</i>
7 years	No overt lymphadenopathy or peritoneal effusion was present.
WEIGHT	ULTRASONOGRAPHIC FINDINGS
21.2 lbs.	<i>Primary Findings</i>
INTERPRETED BY	<ul style="list-style-type: none">Mild prostatomegaly with parenchymal cyst and subjective mild Impingement on the ventral distal colon - probable benign prostatic hyperplasia, minor potential for prostatitisSonographically unremarkable colonFocal right kidney medullary mineralFocal mild isoechoic medial iliac lymphadenopathy - subjectively reactive / benign
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
IMAGING PERFORMED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
Jenna Walsh, CVT	Although the prostate appeared to impinge mildly on the ventral colon, the degree of prostatomegaly and colon impingement was not overtly consistent with that which would overtly indicate alterations to fecal outflow.
HOSPITAL NAME	Rectal palpation to assess for non-visualized distal colon lumen abnormalities, as well as digital assessment of the prostate for evidence of prostatic pain, is recommended, if not done. Neutering could be considered in this patient with an assessment of clinical response following prostatic involution.
Linn VH	
REFERRING VET	Otherwise, an obvious cause of constipation in this patient was not definitively evident. Conservative therapy for constipation may also prove beneficial
Dr. Braat	
INVOICE	
12349	
DATE	
10/12/21	



PATIENT

Knuckles Pearson

SPECIES

Canine

BREED

Minature Pinscher

SEX

Intact Male

AGE

7 years

WEIGHT

21.2 lbs.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Linn VH

REFERRING VET

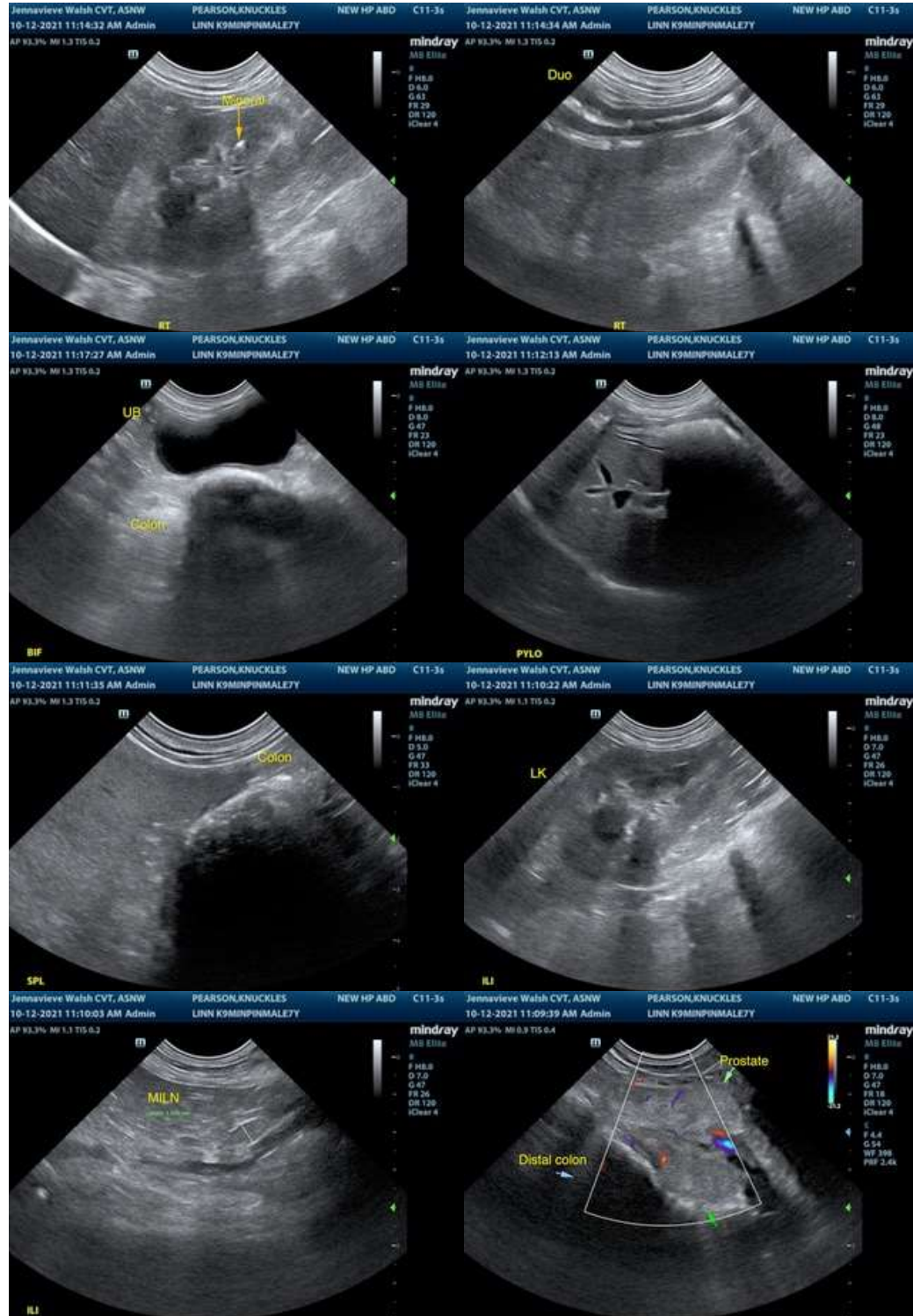
Dr. Braat

INVOICE

12349

DATE

10/12/21





PATIENT

Knuckles Pearson

SPECIES

Canine

BREED

Minature Pinscher

SEX

Intact Male

AGE

7 years

WEIGHT

21.2 lbs.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Linn VH

REFERRING VET

Dr. Braat

INVOICE

12349

DATE

10/12/21



The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com