



PATIENT

Taz Santos

PRESENTING CLINICAL SIGNS

Crying and unable to walk; has been vomiting for the past few days. Palpable mass caudal abdomen. Radiographs: abdominal mass effect. On exam: MM: pale; attitude - dull.

SPECIES

Canine

Urinary System

The bladder exhibited moderate to marked distention with sonographically unremarkable walls, containing anechoic urine without evidence of sediment or calculi.

BREED

Pitbull Mix

The residual prostate was not definitively visualized owing to a large nonhomogeneously echogenic mass in the area of the prostate and pelvic inlet, measuring approximately 14.0 cm x 9.0 cm. The mass was also noted in the area of the urethra, which was not definitively visualized.

SEX

Male Intact

Normal size and contour were present in the kidneys. Approximately half the medulla and both kidneys were replaced by moderate, primarily anechoic fluid within the pelvis extending into the lateral diverticuli. Concurrent left and right proximal ureter dilation was present. The cortex exhibited uniform echogenicity. The left kidney measured 9.9 cm in length. The right kidney measured 9.1 cm in length. Proximal left ureter dilation measured 0.53 cm. Proximal right ureter dilation measured 0.45 cm.

AGE

1 year 6 months

Adrenal Glands

The left and right adrenal glands were not definitively visualized.

WEIGHT

30 kg

Spleen

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.

INTERPRETED BY

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

IMAGING

PERFORMED BY

Pamela Harrigan, RDCS

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were 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.

HOSPITAL NAME

New England AMC

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.46 cm.

REFERRING VET

Alberto Fernandez,
DVM

INVOICE

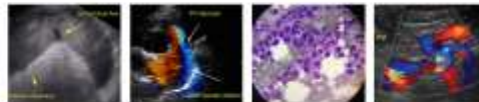
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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The jejunum wall width measured 0.27 cm.

DATE

10/25/21

Normal visible colon wall layers were present with apparent formed feces in lumen.



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Pancreas

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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.

SPECIES

Canine

Free Abdomen

A focal mesenteric or medial iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 2.4 cm x 1.0 cm. Moderate peritoneal and potential concurrent retroperitoneal free fluid was noted. The omentum was of uniform echogenicity.

BREED

Pitbull Mix

SEX

Both the left and right testicles were sonographically unremarkable.

Male Intact

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Large, nonhomogeneous mass in area of the prostate, urethra, and pelvic inlet
- Moderate to markedly distended urinary bladder
- Bilateral moderate hydronephrosis with concurrent left and right proximal ureter dilation
- Peritoneal and potential retroperitoneal free fluid
- Focal mild mesenteric or medial iliac lymphadenopathy - hyperplasia, lymphadenitis, or early neoplastic / metastatic lymphadenopathy possible

AGE

1 year 6 months

WEIGHT

30 kg

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 DABVP (Canine and
 Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The large mass in the area of the prostate, urethra, and pelvic inlet is likely Impeding urine outflow resulting in urinary bladder distention and secondary left and right hydronephrosis. Ultrasound guided FNA of the mass may be considered for cytology assuming normal clotting status. However, CT assessment of the mass for further clarification, as well as surgical planning or determination if potential surgery is an option, in this case, is recommended. Three view chest radiographs are recommended. Correlation with full lab work to assess potassium levels, as well as effusion analysis, could also be considered. A very guarded prognosis is warranted.

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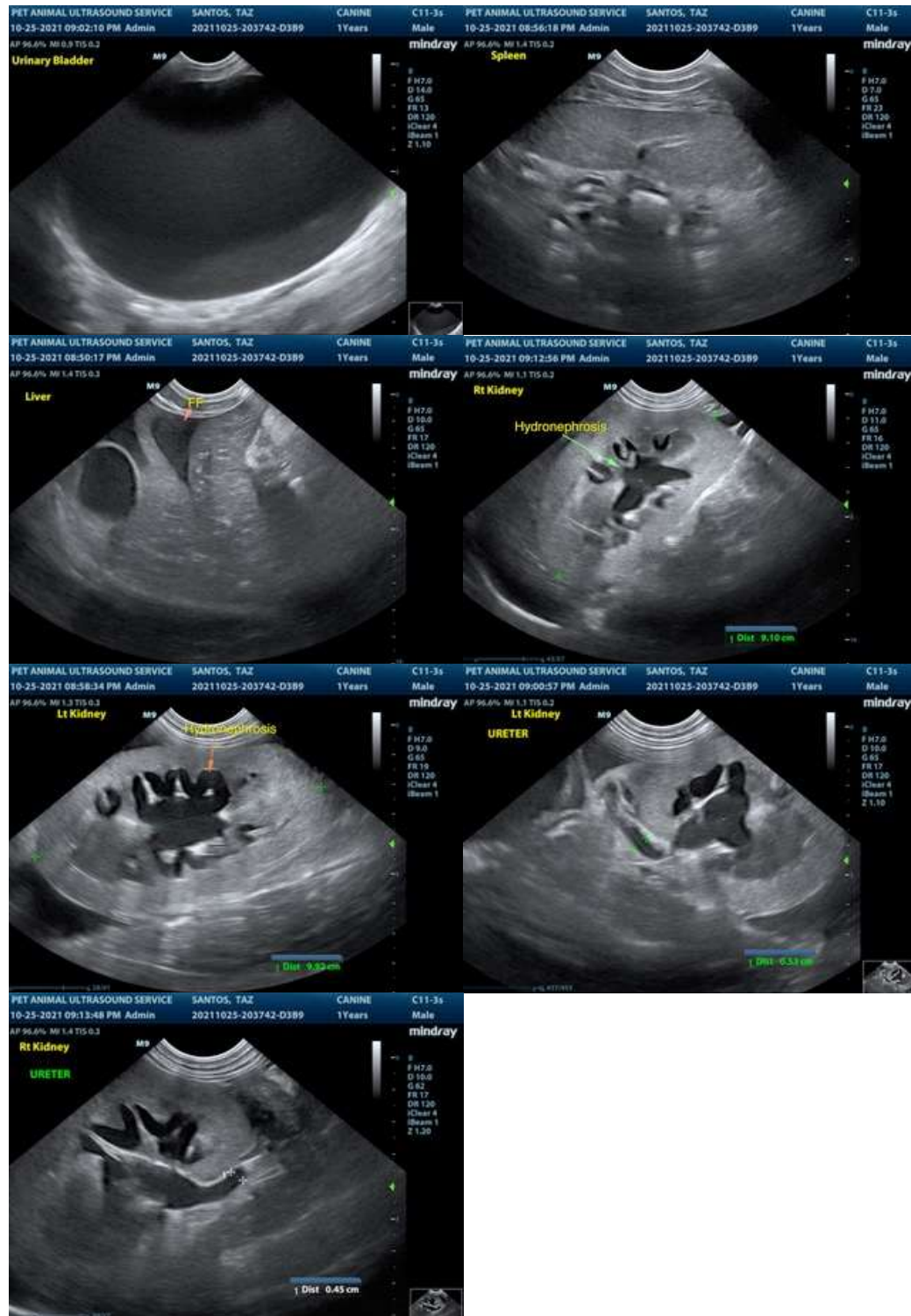
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

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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.

SPECIES

Canine

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info@SonoPath.com

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