



**PATIENT PRESENTING CLINICAL SIGNS**

**Kai Babaian**  
Passed extremely large and concentrated urine at beginning of scan. Seemed aLOT more comfortable afterwards, high stress kind of guy. Sudden onset of lower abdomen pain. Bilateral abdominal cryptorchid(sx scheduled for tomorrow)Monday was QAR, slow moving, whimpering, crying out in pain. Normal appetite, BMs and urination until this morning owner was unsure if he had urinated. Gabapentin and Trazodone given.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: CBC and Chem WNL

**BREED**

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Akita Shep Mix

**Urinary System**

**SEX**

MI

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 were noted.

**AGE**

14mo

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 pelvic dilation. The left kidney measured 6.2 cm in length. The right kidney measured 6.9 cm in length.

**WEIGHT**

30.1kg

The area of the aortic trifurcation was free of pathology.

**INTERPRETED BY**

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

The prostate was mildly 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 measured 2.4 cm in diameter. No overt evidence of prostatitis criteria.

**Adrenal Glands**

**IMAGING PERFORMED BY**

Crystal Hill

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.64 cm width at the caudal pole and 0.72 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.91 cm width at the caudal pole.

**HOSPITAL NAME**

East Credit Veterinary  
Hospital

**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.

**REFERRING VET**

Dr. Webster

**Liver**

**INVOICE**

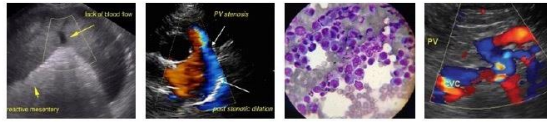
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The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**DATE**

10/04/2022

**Gastrointestinal**



**PATIENT**

Kai Babaian

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.

**SPECIES**

Canine

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.

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

**Pancreas**

**BREED**

Akita Shep Mix

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 was evident.

**SEX**

MI

No overt lymphadenopathy or peritoneal effusion was present.

Definitive retained testicle present in the caudoventral abdomen ventral to the urinary bladder and slightly cranial to the level of the prostate measuring 2.8 cm in diameter.

**AGE**

14mo

Separate probable retained testicle noted dorsal to the urinary bladder potentially in the area of the iliac trifurcation measuring 2.5 cm in diameter.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

30.1kg

- Overtly normal urinary bladder
- Mild benign prostatic hyperplasia-overall expected presentation for a young intact male canine
- Bilateral retained intra-abdominal testicles

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DVM, DABVP  
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No overt obstructive pathology to urine outflow was visualized. Catheter passage to ensure urethral patency may be considered if clinically indicated. Confirmed bilateral intra-abdominal retained testicles subjectively ventral and dorsal to the level of the bladder and cranial to the level of the prostate. No obvious evidence of structural intra-abdominal pathology as a cause of intra-abdominal pain was observed.

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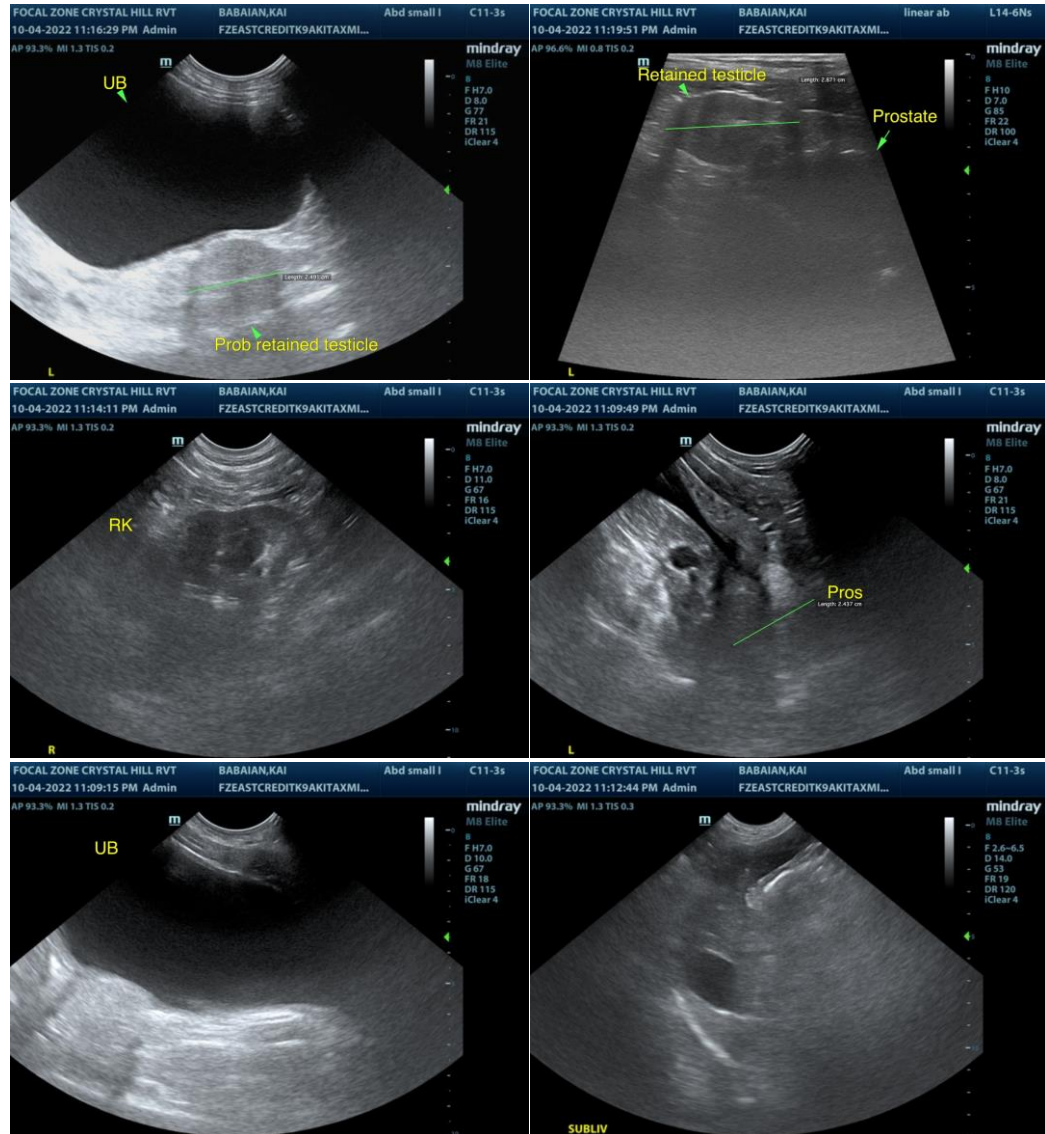
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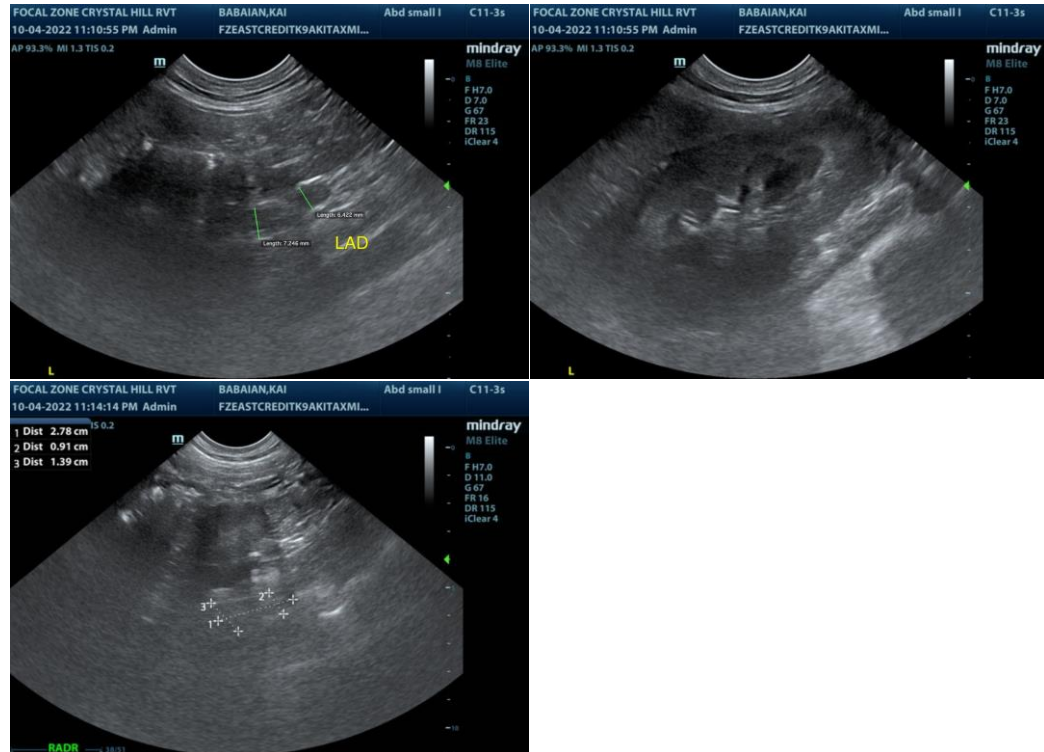
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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