


**PATIENT**

Ionn Venables

**SPECIES**

Canine

**BREED**

Belgian Malinois

**SEX**

Intact Male

**AGE**

8 Years

**WEIGHT**

37.2 kg

**INTERPRETED BY**

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

**IMAGING  
 PERFORMED BY**

Crystal Hill

**HOSPITAL NAME**

 Graham Animal  
 Hospital

**REFERRING VET**

Dr. Lukacs

**INVOICE**

26051

**DATE**

10/5/21

**PRESENTING CLINICAL SIGNS**

Acute 4 d history of poor appetite, PU/PD, vomited today. Bloodwork yesterday azotemia (SDMA 28 ug/dL, creatinine 236 umol/L, urea 19.8 mmol/L). Urinalysis trace protein, USG 1.015. Spec CPL WNL. Lepto testing, urine culture pending. Started on IVF, IV antibiotics, supportive care to be started at time of ultrasound. Has history of benign prostatic hyperplasia and prostatitis August 2021, received antibiotics, continued on finasteride.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**
**Urinary System**

The urinary bladder was normal in size and tone with mild focal areas of ventral and apical mural hypertrophy with associated mild asymmetrical luminal surface contour. Potential minor polypoid like areas were present. Moderate non-dependent particulate to swirling sediment was present. No calculi. No distinct masses. Focal apical urinary bladder wall measured 0.95 cm in width. The prostate was indistinctly visualized owing to pelvic shadowing, yet exhibiting subjective generalized mild enlargement with mild asymmetrical capsule contour and non-homogeneous to mixed echogenic parenchyma measuring 4.7 cm x 4.2 cm. No overt evidence of parenchymal mineralization.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. No overt pyelonephritis. No evidence of overt retroperitoneal inflammation associated with either kidney. The left kidney measured 8.5 cm. The right kidney measured 8.2 cm.

The area of the aortic trifurcation was free of pathology.

**Adrenal Glands**

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.5 cm length x 0.58 cm at the caudal pole.

The right adrenal gland was indistinctly visualized, yet without overt pathology, subjectively measuring 2.2 cm length x 0.71 cm at the caudal pole.

**Spleen**

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

**Liver**

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.



**PATIENT** *Gastrointestinal*

**Jonh Venables** 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** The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

**Canine**

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

**Belgian Malinois** *Pancreas*

**SEX** 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.

**Intact Male**

*Free Abdomen*

**AGE** No overt lymphadenopathy or peritoneal effusion was present.

**8 Years**

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

**37.2 kg**

- Mild cystitis to polypoid cystitis pattern with moderate non-dependent, swirling sediment
- Mild prostatomegaly – benign prostatic hyperplasia or prostatitis suspected, minor potential for prostatic neoplasia, yet thought less likely.
- Non-specific nephropathy – acute renal insult (infectious, toxin or other), non-specific nephritis, or other.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Pending urine culture and sensitivity and Leptospirosis testing Urine protein/creatinine ratio is suggested if no evidence of inflammation cells. Although consider less likely, resting cortisol to rule out occult Addison's disease is suggested. Overall, the kidneys did not appear to be end stage without overt evidence of significant loss of architecture. Empirically, continued fluid and antibiotic therapy with as-needed gastrointestinal supportive care and monitoring of renal response recommended.

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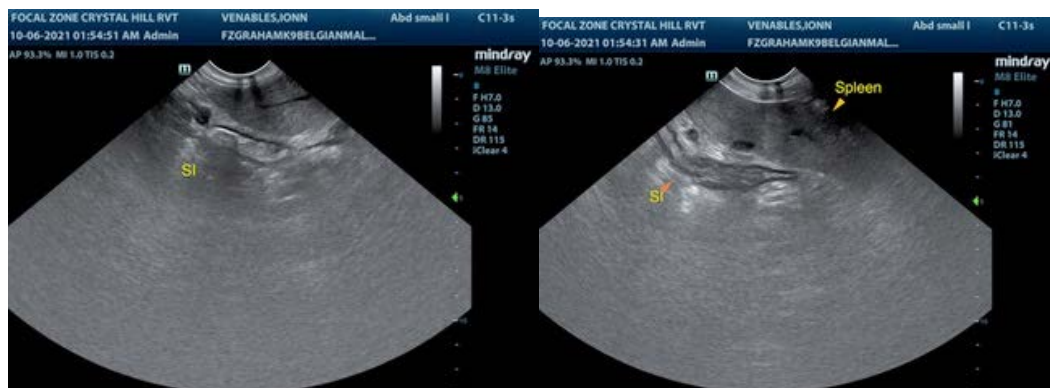
Dr. Lukacs

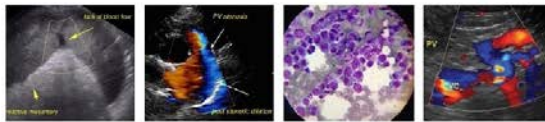
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

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Belgian Malinois

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info@SonoPath.com

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