

**PATIENT**

Buddy Garrity

SPECIES

Canine

BREED

Labrador

SEX

MN

AGE

6yr

WEIGHT

105lb

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING
PERFORMED BY**

Amy Mayhew LVT

HOSPITAL NAMESVS Imaging
Michigan**REFERRING VET**Milford Veterinary
Clinic**INVOICE**

12311ag

DATE

11/28/2022

PRESENTING CLINICAL SIGNS

Leaking urine at night ever since he was neutered on July 15th. Licking and cleaning the area. Recently gagging.

Abnormal PE/Chem/CBC/UA Results: Urinalysis was normal. R and L lateral X-rays were taken.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4 cm 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.

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 7.9 cm in length. The right kidney measured 7.7 cm in length.

The area of the aortic trifurcation was free of pathology.

The residual prostate exhibited mild enlargement with primarily maintained symmetrical capsule contour in which the capsule was able to be differentiated from surrounding tissue. Mild non-homogeneous regionally hyperechoic parenchyma was present which may indicate areas of prostatic fibrosis. No evidence of prostatic cysts, mineralization of periprostatic inflammation. The residual prostate measured 4 cm x 3.8 cm.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.69 cm width at the caudal pole and 0.74 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 0.71 cm width at the caudal pole and 0.70 cm width at the cranial pole.

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.

Liver

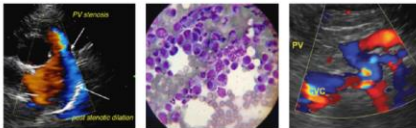
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin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

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate non-shadowing ingesta with no signs of ileus, obstruction or foreign material.

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SVS Mobile Imaging MI 734-637-7711
svsimagingmi@gmail.com



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1-800-838-4268 info@sonopath.com SonoPath.com

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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.

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

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Pancreas

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.

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Free Abdomen

No peritoneal effusion was present.

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Focal, mildly prominent to enlarged medial iliac lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). These were not consistent with inflammatory or neoplastic criteria.

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ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable urinary bladder
- Persistent mild residual prostatomegaly exhibiting non-uniform parenchyma
- Normal bilateral kidneys

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Secondary

- Gastric ingesta-likely post prandial presentation

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although not definitive potential mild residual prostatitis may be of concern in this patient as the prostatomegaly may suggest inhibited prostatic involution given the time frame since neuter. Rectal palpation to assess for residual prostate discomfort is possible may be considered. Prostatic sampling required for further clarification. No overt evidence of prostatic neoplastic criteria was present. Potential for nocturnal enuresis given the pattern of incontinence could be possible. If documented NPO some degree of metabolic stasis could be present. Gastric protectant protocol with a hydrolyzed diet trial may prove beneficial.

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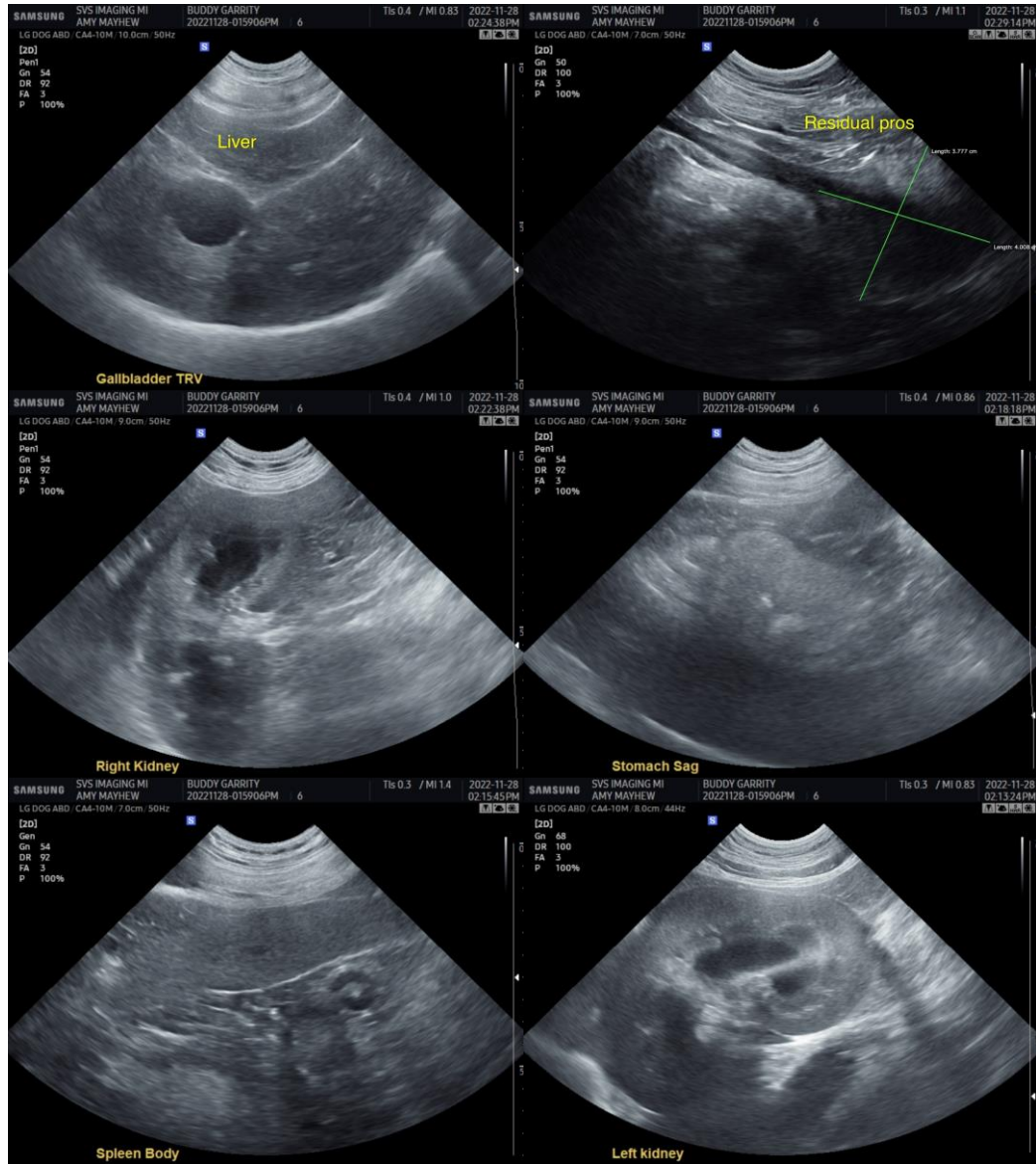
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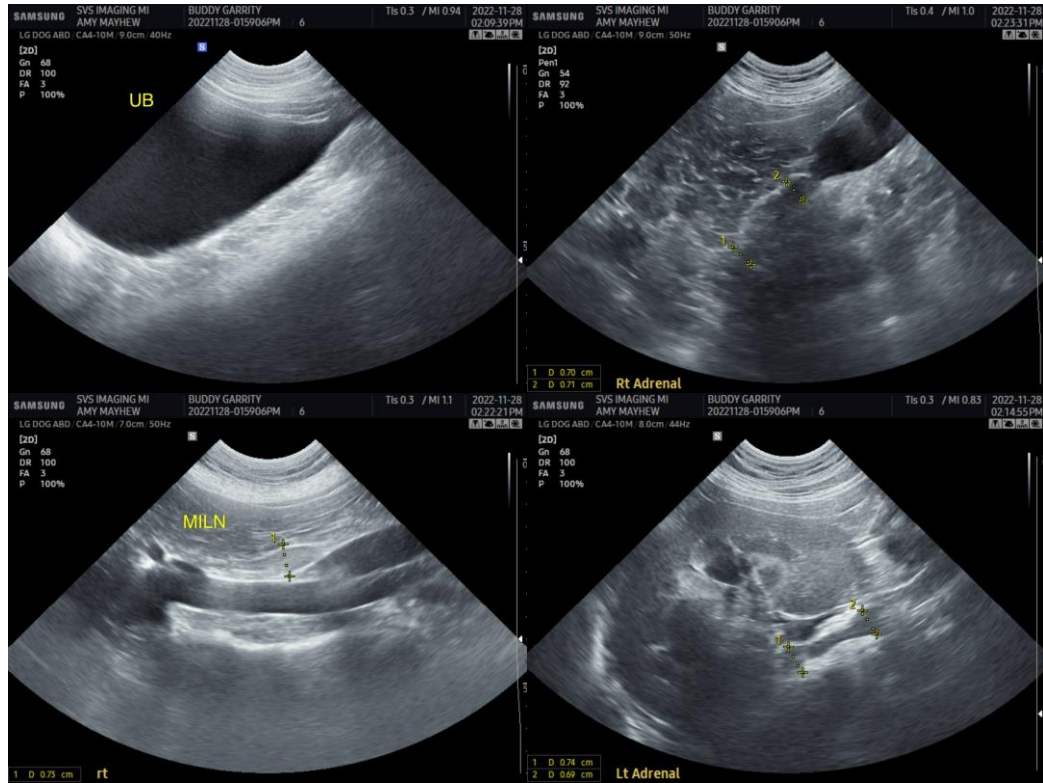
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com