

PATIENT PRESENTING CLINICAL SIGNS

Frankie Yen History: e/d a lot, trouble emptying bladder

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

The urinary bladder was mildly distended in size with subjective normal tone. The urinary bladder walls were normal in appearance without evidence of inflammatory or neoplastic mural criteria. Anechoic urine was present with no sediment or calculi.

BREED
Silken Wind Hound

The residual prostate was indistinctly visualized owing to overlaying pelvic inlet shadowing yet without overt pathology, subjectively measuring 1.5 cm in width. The post-prostatic urethra was not visualized owing to overlaying pelvic inlet shadowing.

SEX

Neutered Male

The area of the aortic trifurcation was free of pathology.

AGE

11.5 Years

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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.7 cm in length. The right kidney measured 6.2 cm in length.

WEIGHT

32 Pounds

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 2.7 cm in length x 0.84 cm width in the caudal pole.

The right adrenal gland was not definitively visualized owing to overlaying colonic gas.

IMAGING PERFORMED BY

Sara Hansen

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.

HOSPITAL NAME

Companion PC

Liver

REFERRING VET

Dr. Mills

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.

INVOICE

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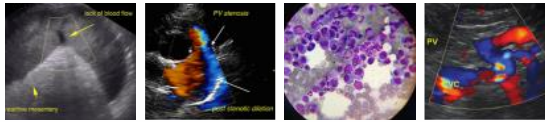
The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

DATE

2/2/23

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.



PATIENT

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.

Frankie Yen

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

SPECIES

Pancreas

Canine

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.

BREED

Silken Wind Hound

No omental masses, lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

Neutered Male

- Sonographically unremarkable yet mildly distended urinary bladder
- Overtly normal residual prostate
- Structurally unremarkable gastrointestinal tract

AGE

11.5 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

32 Pounds

Overall, no sonographic evidence of significant visceral pathology is present. Catheter passage to assess urethral patency may be considered, especially if evidence of stranguria. A thorough musculoskeletal and neurological examination is recommended, if not done. No overt sonographic evidence of intraabdominal neoplastic criteria noted.

INTERPRETED BY

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Although the right adrenal gland was not definitively visualized, the left adrenal gland and liver appearance were not overtly suggestive of primary adrenal disease or hepatopathy. If definitive PU/PD and polyphagia is present, screening cortisol to creatinine ratio could be considered. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

IMAGING PERFORMED BY

Sara Hansen

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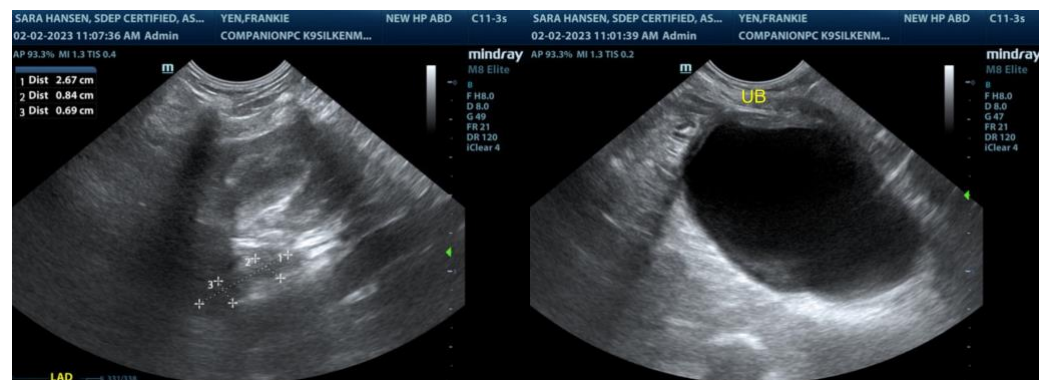
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PATIENT

Frankie Yen

SPECIES

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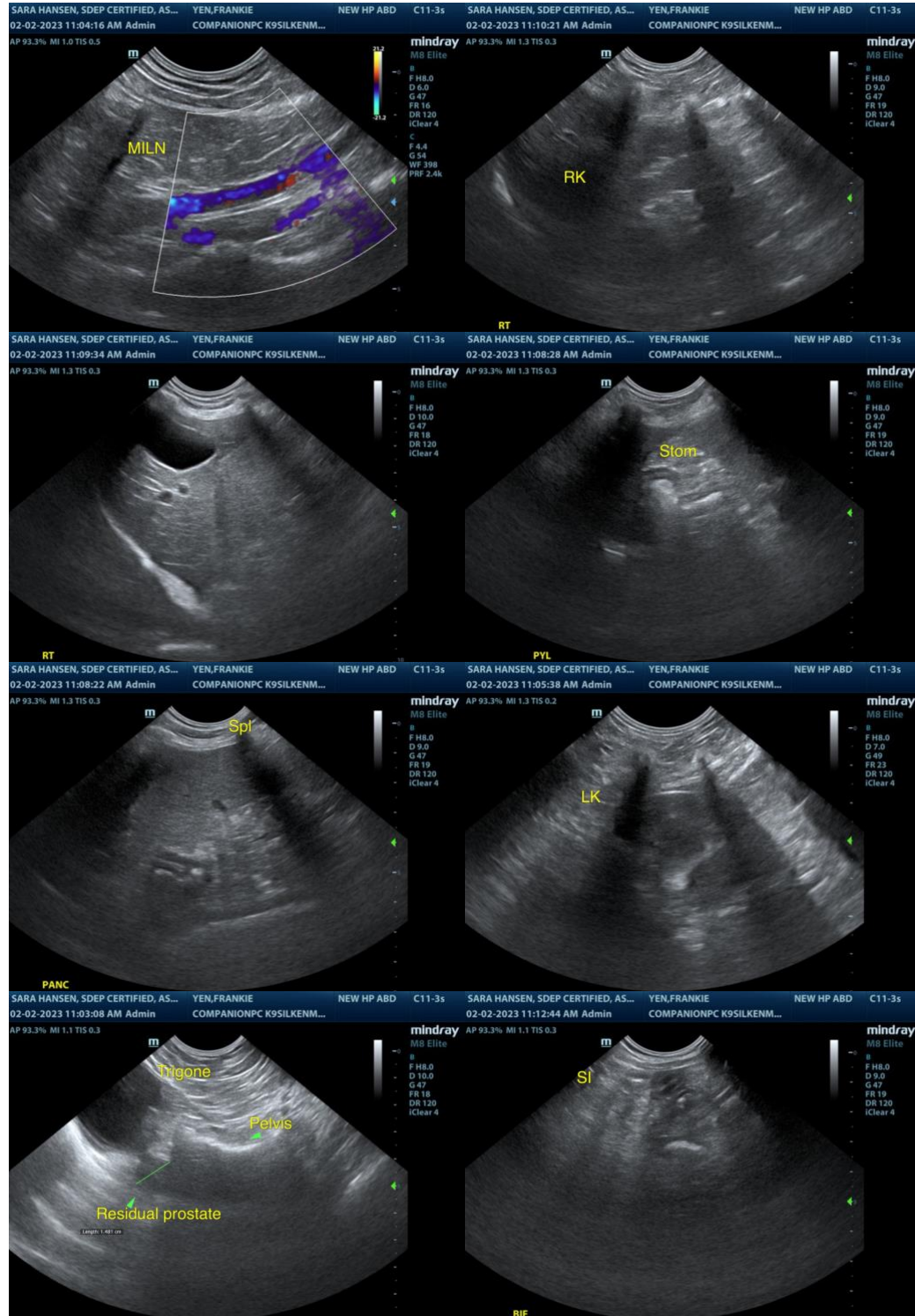
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not



PATIENT visible in the image/video clips provided.

Frankie Yen 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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