



PATIENT PRESENTING CLINICAL SIGNS

Padfoot Bowman

History: Presented February 27/23 for multiple episodes of blood in urine, polydipsia. Not straining to urinate, no polyuria. No abnormalities noted upon exam except multiple SQ masses. Penis NAF, did not attempt to examine prostate due to size of patient/O unable to restrain (will attempt when in for ultrasound). Only meds Ubavet Joint.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Rottie X

The urinary bladder was normal in size and tone. An irregular nonhomogenous mineralized mass was noted in the area of the caudal lumen and trigone, measuring approximately 3-4 cm in diameter. Concurrent thickened dorsal and ventral trigone and cystourethral junction walls, extending into the proximal urethra were noted. No overt evidence of obstruction to urine outflow. Anechoic urine was present with mild concurrent nondependent particulate sediment was present. Doppler assessment of the mass confirmed intramass blood flow. Normal urethral tone to a depth of 2.0 cm. Possible distal ureter dilation at the level of the trigone.

SEX

Neutered Male

AGE

12 Years

The residual prostate was indistinctly visualized without evidence of concurrent pathology or overt neoplastic criteria.

No evidence of medial iliac or sublumbar lymphadenopathy.

WEIGHT

55.6 kg

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 pyelectasia or hydronephrosis was present. The left kidney measured 7.8 cm in length. The right kidney measured 8.8 cm in length.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.8 cm width at the caudal pole.

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Crystal Hill

The right adrenal gland was not definitively visualized.

Spleen

HOSPITAL NAME

Main Street AH

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. Morris

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion.

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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

3/1/23

Gastrointestinal



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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

Rottie X

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

Neutered Male

Free Abdomen

No omental masses, lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

AGE

12 Years

- Urinary bladder mass, extending into the cystourethral junction and likely proximal urethra
- Possible early distal ureter dilation
- Age-related kidneys- no evidence of hydronephrosis
- Minor hepatic parenchymal remodeling

WEIGHT

55.6 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

The urinary bladder mass is consistent with neoplastic criteria and likely transitional cell carcinoma. The mass does not appear to be obstructive at this stage yet monitoring going forward for evidence of stranguria, etc., is recommended. No overt evidence of regional metastasis. The location of the urinary bladder mass precludes surgical options. Oncology consult may be considered.

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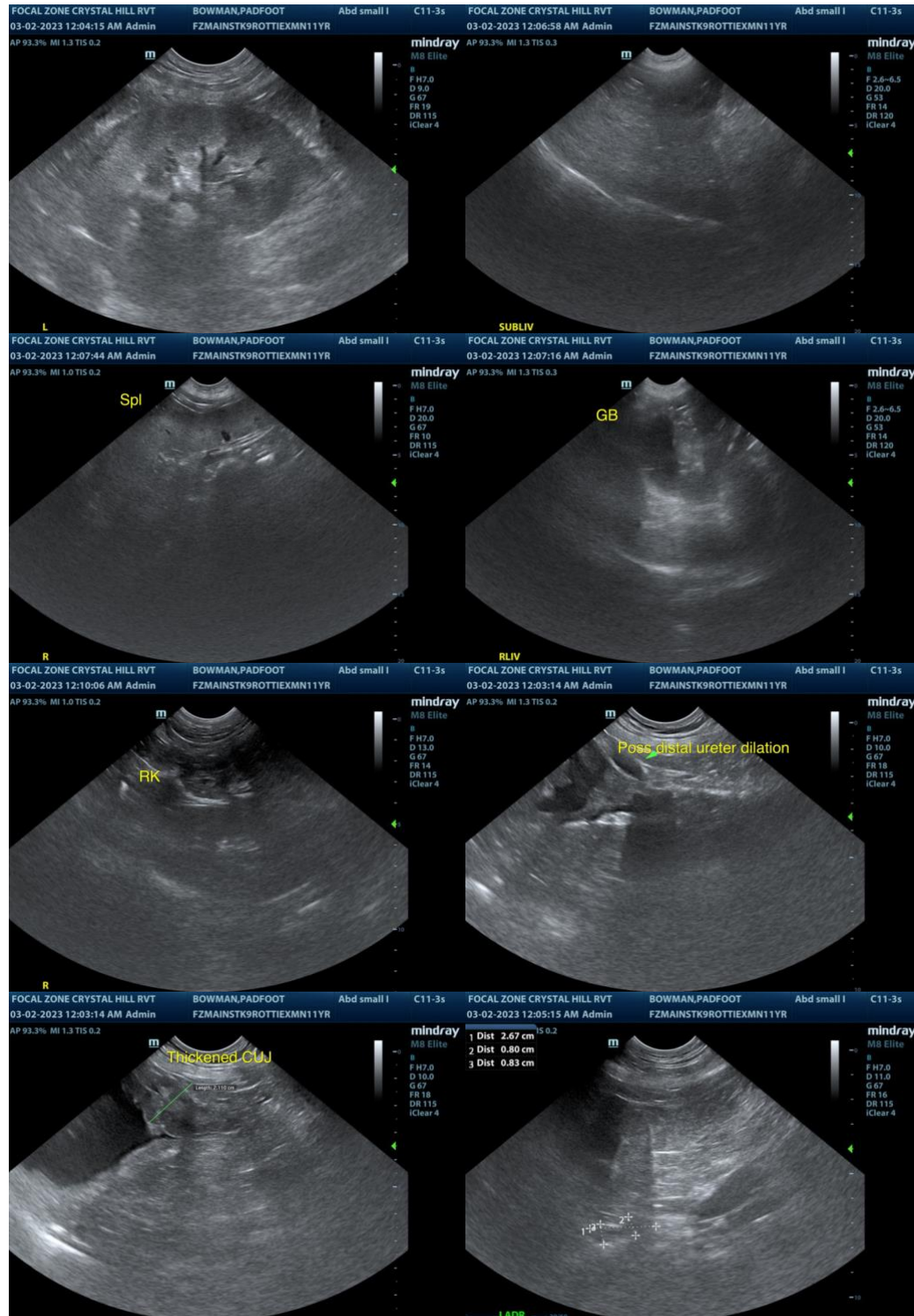
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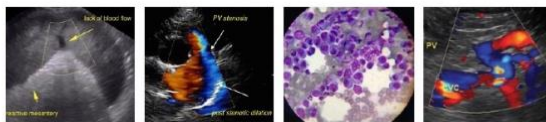
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



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can be of any further assistance please contact me.

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