



PATIENT

Terra Mmiller

PRESENTING CLINICAL SIGNS

Repeated UTIs that return when treatment is discontinued. Patient is very arthritic

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shepherd Mix

The urinary bladder presented moderately thickened urinary bladder wall isoechoic to the adjacent normal urinary bladder wall. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour with micropolyploid luminal mural changes. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone. Mild anechoic urine was present in the lumen with mild particulate sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus. The ureteral papillae were normal. The ureters were not visible which is normal. No overt urinary bladder tumors.

SEX

FS

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint medullary mineral was present. The left kidney measured 6.9 cm in length. The right kidney measured 6.7 cm in length.

AGE

14

The area of the aortic trifurcation was free of pathology.

WEIGHT

34kg

Adrenal Glands

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. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.77 cm width at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen exhibited overall normal size with mild capsule asymmetry and generalized parenchymal heterogeneity. A solitary mass like lesion exhibiting cystic appearing center with hyperechoic periphery was present measuring 5.5 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Dr. Belan

Liver/Gallbladder

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. A solitary non-homogenous to mildly cystic nodule was present measuring 1.5 cm in diameter. Intermittent hyperechoic nodules suggestive of benign hyperplasia or small lipogranulomas were present. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and moderate non-homogenous to congealed non-organized debris and suspect peripheral luminal mucus. The cystic and common bile ducts were normal.

HOSPITAL NAME

Airdrie Animal Clinic

REFERRING VET

Dr. Kovacs

INVOICE

13320ag

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.

DATE

03/28/2023



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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.

SPECIES

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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.

BREED

Shepherd Mix

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

- Chronic cystitis pattern with mild urinary bladder sediment.
- Bilateral chronic renal changes exhibiting pinpoint medullary mineral-no overt pyelonephritis.
- Non-specific centrally cystic to peripherally hyperechoic splenic mass lesion-cystic myelolipoma, hyperplasia, hematopoiesis, less likely neoplasia all potentials.
- Hepatic parenchyma remodeling with mildly cystic non-homogenous and intermittent hyperechoic intraparenchymal nodules-subjectively benign.
- Moderate gallbladder debris and suspect luminal mucus-possible very early mucocele.

AGE

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WEIGHT

34kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bacterial cystitis or embedded mural infection given the recurrent UTI may be of concern. A screening BRAF assay to assess for non-obvious urinary bladder neoplastic criteria is suggested. A urine C/S on a sterile urine sample if not recently done recommended. Given suspected chronic to possible bacterial cystitis and based on C/S results, a higher dose/shorter frequency antibiotic regimen may prove more effective at eliminating underlying infection.

Correlation with CBC /chemistry panel and UA is recommended. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial if evidence of cholestasis is present. Sonographic monitoring of the cystic splenic mass for evidence of progression would be reasonable given the age of the patient. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology.

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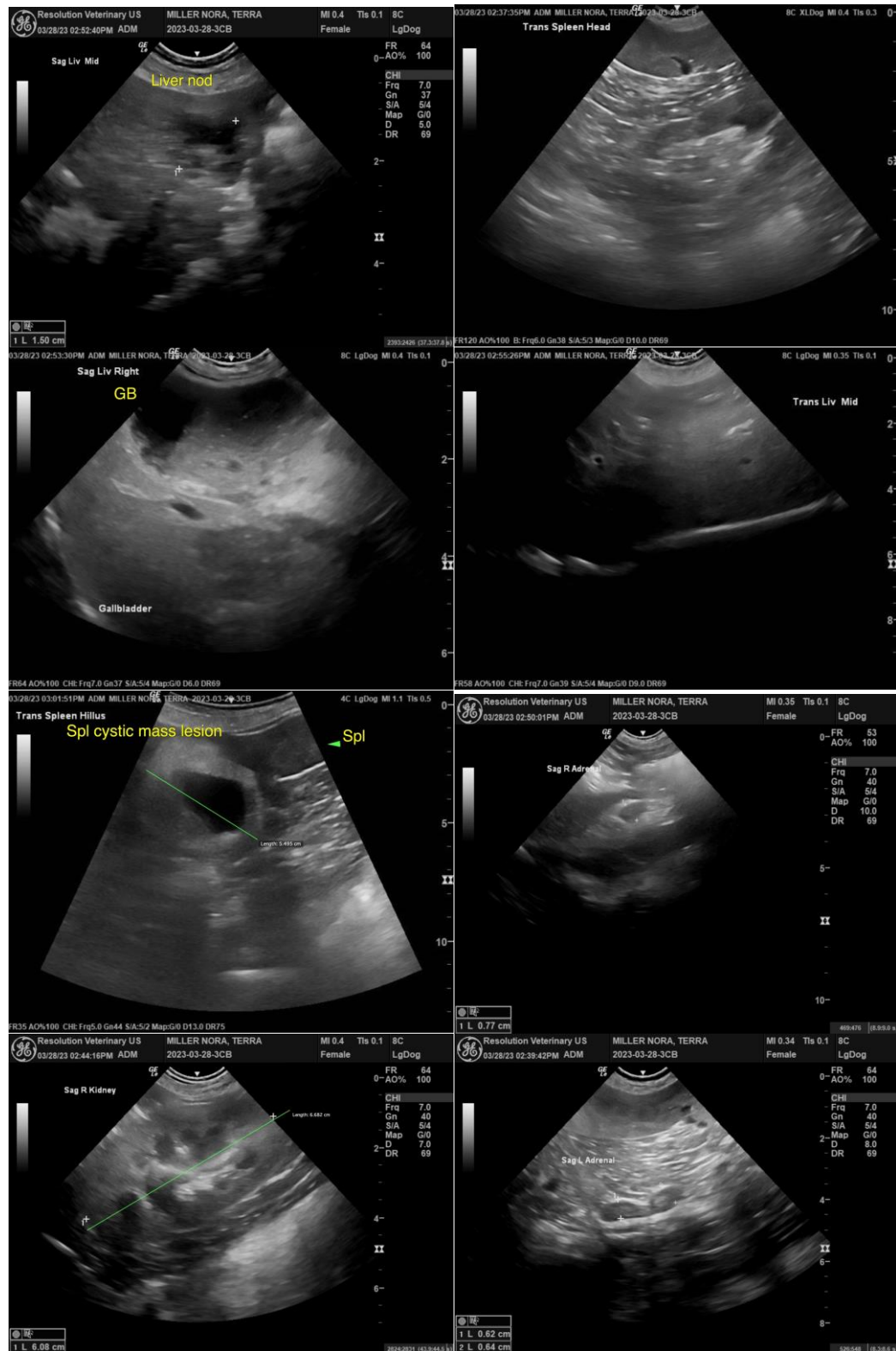
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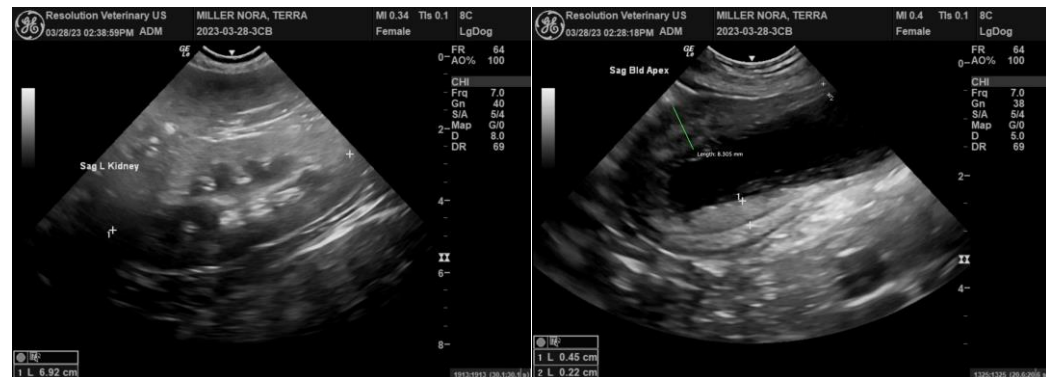
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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