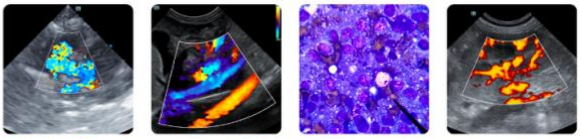


PATIENT

Tucker Espinosa

SPECIES

Canine

BREED

Goldendoodle Standard

SEX

Male

AGE

8

WEIGHT

38.2

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Agnes E. Rupley DVM

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

Dr. Agnes E. Rupley DVM

INVOICE

14757

DATE

03/31/26

PRESENTING CLINICAL SIGNS

Presented for bloody urine, urinating in house, and diarrhea. Pain on caudal abdominal palpation with mass or firm bladder. Ultrasound revealed mass and fluid in addition to bladder in caudal abdomen. Periprostatic cyst suspected.

Chemistry panel revealed a mildly elevated ALT at 130 with normal other results. CBC revealed a leukocytosis at 23.62 resulting from a neutrophilia at 21 and monocytosis at 2.126 with abundant young neutrophils consistent with infection / inflammation. Voided urinalysis sample revealed protein 300, red and white blood cells, bacteria, pH 9, and Specific Gravity: 1.022

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone without overt evidence of obstruction to urine outflow. The trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone. Mild nonuniform thickening of the urinary bladder wall was present. Hyperechoic shadowing calculi were present in the dependent lumen.

The prostate was enlarged in size with intact, primarily symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was heterogeneous with a mixed pattern of varying echogenicity without evidence of parenchymal mineralization. The prostate measured 7.0 cm in diameter. A subjective caudally expanding thinly walled extraparenchymal prostatic cyst was present extending ventrally to ventrolaterally to the urinary bladder measuring approximately 5.0 cm to 6.0 cm in diameter. The extraparenchymal cyst contained anechoic fluid. Mild associated periprostatic inflammation. No evidence of caudal abdomen or retroperitoneal effusion. The left and right testicles were sonographically normal.

Possibly cystic medial iliac lymph nodes obscured by the extraparenchymal prostatic cyst is not excluded.

Normal size and margination was 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 pyelectasia. The left kidney measured 6.5 cm in length. The right kidney measured 6.8 cm in length.

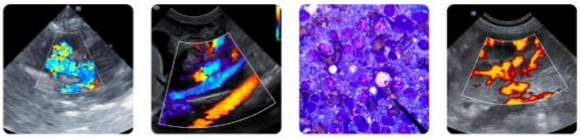
Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.67 cm width at the caudal pole.

The right adrenal gland was not definitively visualized.

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



PATIENT

Tucker Espinosa

SPECIES

Canine

BREED

Goldendoodle Standard

SEX

Male

AGE

8

WEIGHT

38.2

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Agnes E. Rupley DVM

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

Dr. Agnes E. Rupley DVM

INVOICE

14757

DATE

03/31/26

thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver & Gallbladder

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. Subjective adequate to normal vascular volume.

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 was empty with no signs of ileus, obstruction or foreign material.

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 semi formed to soft fecal matter.

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.

Free Abdomen

No evidence of mid abdomen mesenteric lymphadenopathy was present.

ULTRASONOGRAPHIC FINDINGS

- Prostatitis pattern with extraparenchymal/periprostatic cyst.
- Multiple cystic calculi with cystitis pattern.
- Normal bilateral kidneys.
- Sonographically unremarkable normal volume liver.
- Normal gastrointestinal tract with semi formed/soft fecal matter in colon.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cystotomy with calculi analysis, concurrent surgical drainage or omentalization of the extraparenchymal prostatic cyst with concurrent neuter is recommended. Perioperative empirical therapy for prostatitis and urinary tract infection with monitoring of urinalysis, as needed urine culture/sensitivity and sonographic monitoring of prostatic involution is recommended. No overt evidence of intrahepatic or extrahepatic macroscopic shunt. Gastrointestinal support which may include dietary trial and high colony count probiotics such as Proviable is recommended.

PATIENT

Tucker Espinosa

SPECIES

Canine

BREED

Goldendoodle Standard

SEX

Male

AGE

8

WEIGHT

38.2

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Agnes E. Rupley DVM

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

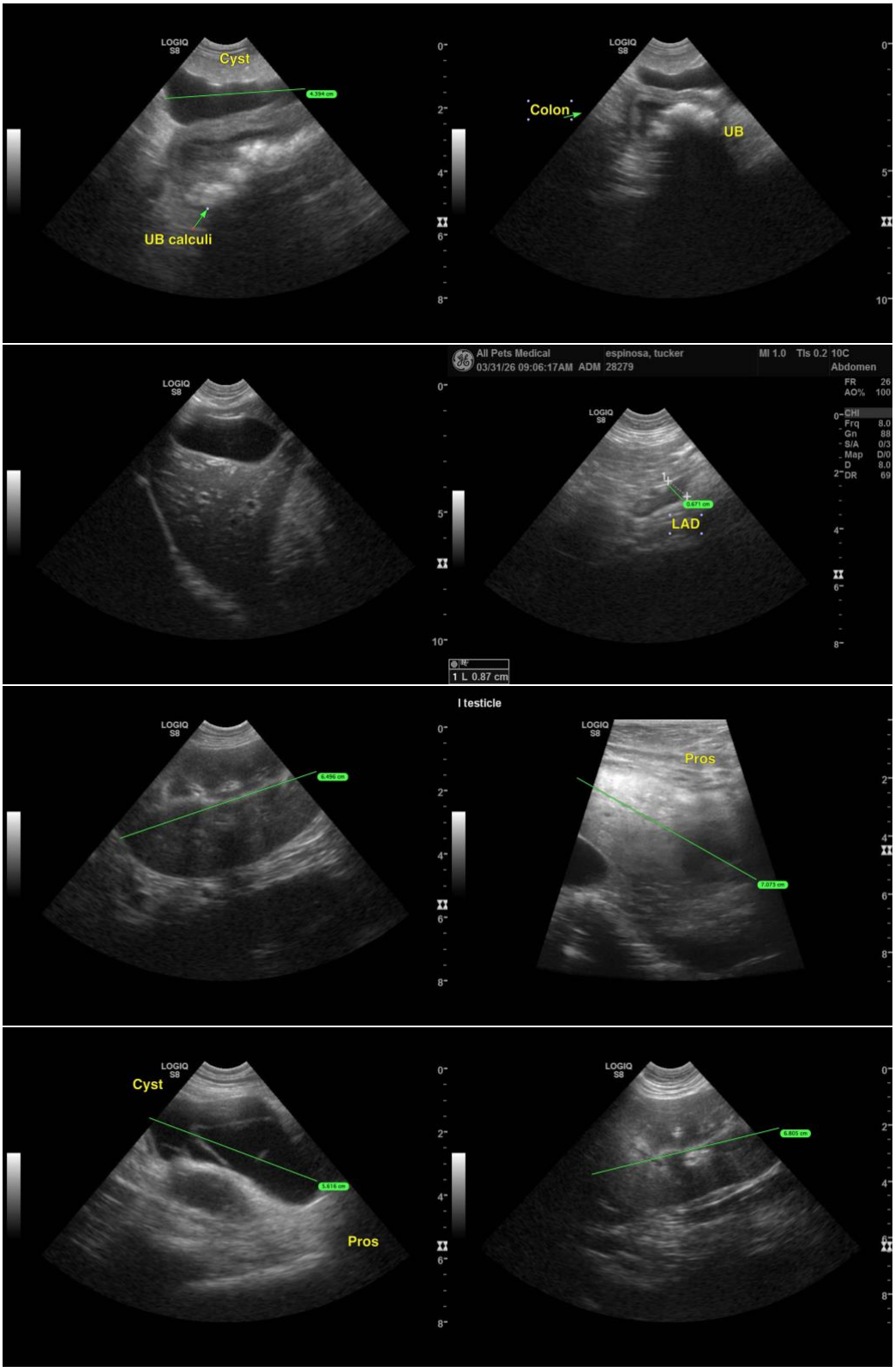
Dr. Agnes E. Rupley DVM

INVOICE

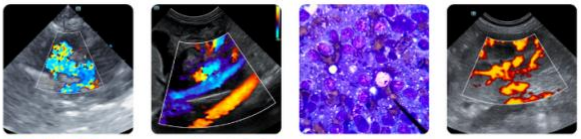
14757

DATE

03/31/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Tucker Espinosa

SPECIES

Canine

BREED

Goldendoodle Standard

SEX

Male

AGE

8

WEIGHT

38.2

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Agnes E. Rupley DVM

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

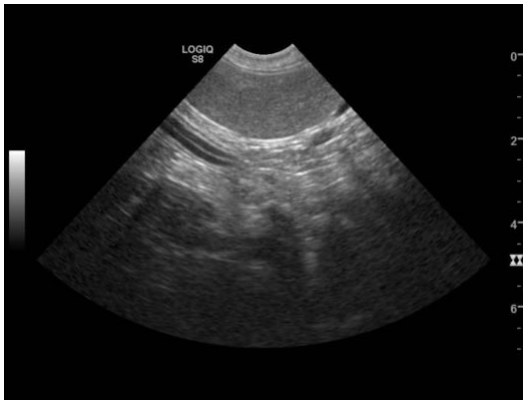
Dr. Agnes E. Rupley DVM

INVOICE

14757

DATE

03/31/26



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