

**PATIENT**

Hewie Bratton

**SPECIES**

Canine

**BREED**

Shepherd Mix

**SEX**

Male

**AGE**

10 years

**WEIGHT**

70 pounds

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

Tom McNeill

**HOSPITAL NAME**

SVS Imaging CT

**REFERRING VET**Country Vet Service  
Dr George**INVOICE**

10339ag

**DATE**

04/11/2022

**PRESENTING CLINICAL SIGNS**

History: Hematuria for about 5-6 weeks. Suspected bacteriuria on urinalysis via cystocentesis. Prostatic wash performed. Culture was negative.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder, trigone and cystourethral junction 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 was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some mildly increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 7.0 cm in length. The right kidney measured 7.6 cm in length.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 5.6 cm x 5.2 cm. Anechoic, thinly walled parenchyma cysts were present. An example measured 1.5 cm diameter.

The right testicle was sonographically normal measuring 3.9 cm in length. The left testicle was mildly enlarged compared to the right measuring 4.4 cm in length. Primarily homogeneous parenchyma with solitary nonexpansive left testicular cyst vs nodule measuring 0.49 cm in diameter was noted.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.66 cm width at the caudal pole and 0.70 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 0.58 cm width at the caudal pole and 0.97 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.

**IMAGING PERFORMED BY**

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**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 apparent formed feces in lumen.

**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**

Nonhomogeneous to cystic medial ileac lymph nodes exhibiting a normal width: length ratio (<0.5) were present. An example of a medial ileac lymph node measured 2.6 cm x 0.76 cm. Concurrent focal spherical uniform hypoechoic hypogastric to sacral lymph node was noted caudal to the ileac trifurcation measuring 1.1 cm in diameter.

**ULTRASONOGRAPHIC FINDINGS**

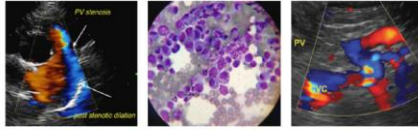
- Benign prostatic hyperplasia with intraparenchymal cysts, potential for sterile prostatitis.
- Sonographically unremarkable urinary bladder.
- Mild chronic renal changes-no evidence of pyelonephritis.
- Nonspecific nondisruptive left testicle parenchymal cyst vs cystic nodule.
- Cystic to nonhomogeneous medial iliac lymphadenopathy with focal hypoechoic hypogastric/sacral lymphadenopathy.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The medial iliac and hypogastric/sacral lymphadenopathy was nonspecific yet not overtly suggestive of neoplastic criteria. Potential for chronic medial iliac hyperplasia or acute on chronic lymphadenitis is possible. No overt evidence of prostatic neoplastic criteria was observed. Neutering is likely ideal in this patient with sonographic monitoring of prostatic involution as well as of the medial iliac and hypogastric/sacral lymphadenopathy.

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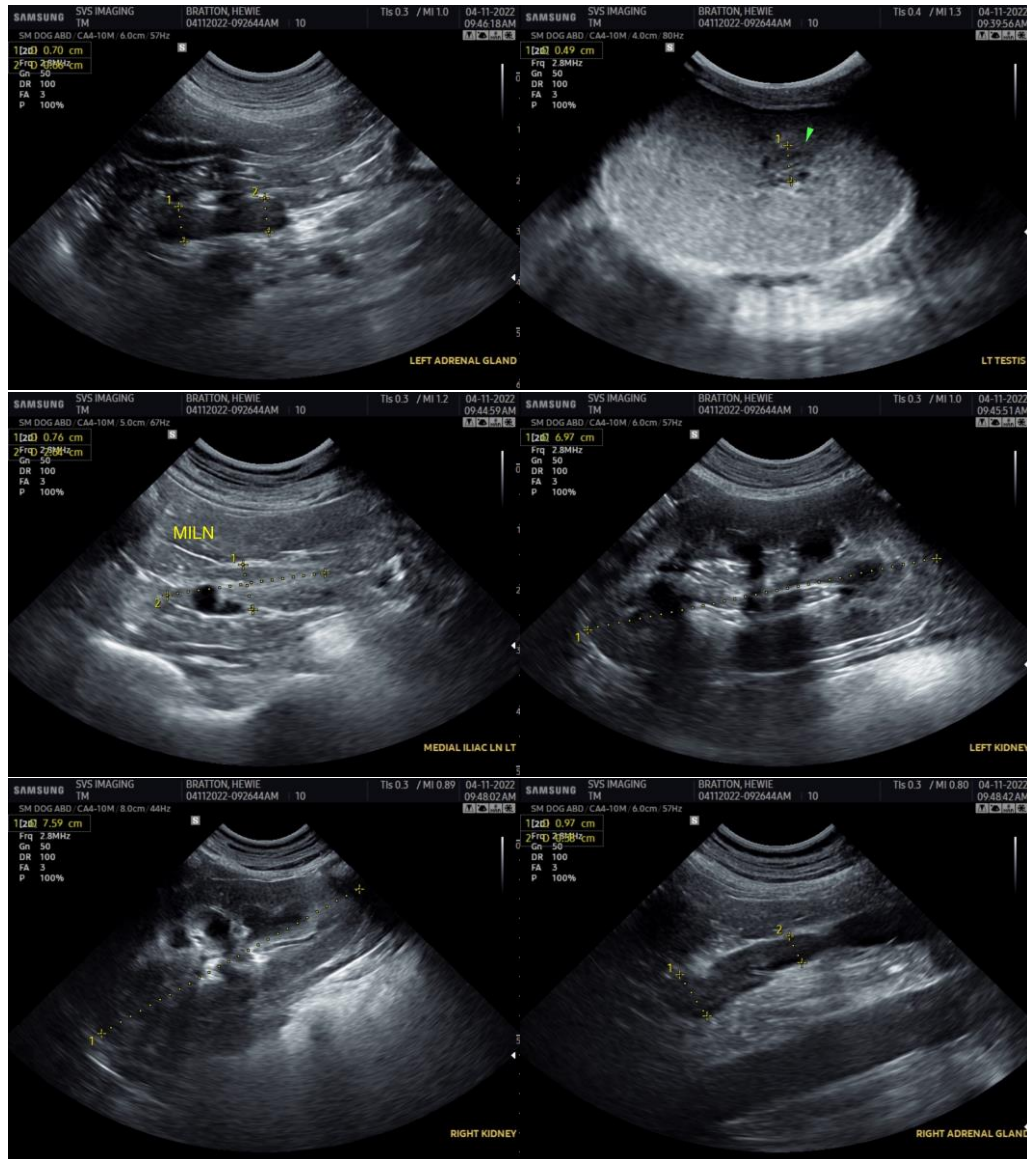
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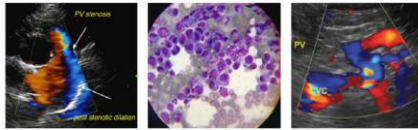
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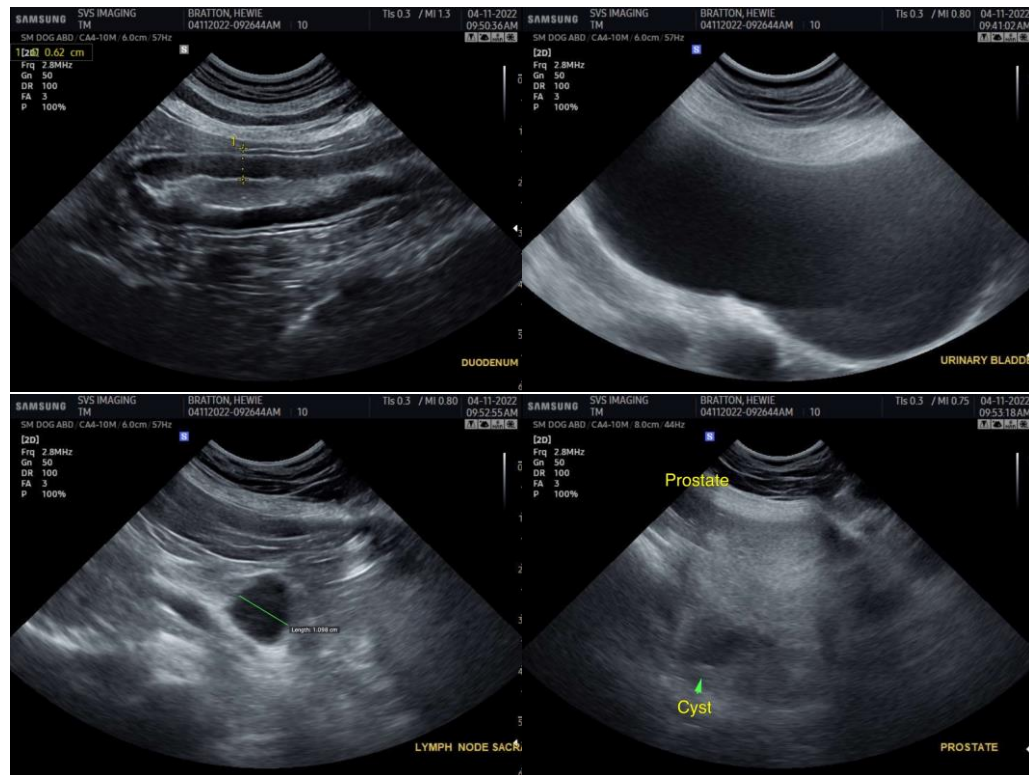
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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