



PATIENT	PRESENTING CLINICAL SIGNS
Cagney Spirer	Pollakuria, not fully emptying bladder, leaking urine. R/O TCC, prostatitis, BPH, neoplasia, cystitis, vs. other.
SPECIES	Current meds: Simplicef 200mgs 1 PO SID x 7 days, Metronidazole for stress colitis.
Canine	Abnormal PE/Chem/CBC/UA Results: ALP 146. CBC: WNL. U/A: Trace epith. 2-3 HPF, RBC 4-10 HPF, WBC 2-3 HPF, pH 8.0, USG: 1.024.
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
German Shepherd	Urinary System
SEX	The urinary bladder was distended in size. Anechoic urine was present in the lumen with minor non-dependent particulate sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus.
MN	
AGE	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. Bilateral mild hydronephrosis exhibited by mild urine dilated pelvis extending mildly into the lateral diverticuli. The bilateral ureters were mildly distended yet were not definitively visualized to the level of the urinary bladder. The left kidney measured 8.0 cm in length. The right kidney measured 8.0 cm in length.
12yr	
WEIGHT	The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy.
76.6lb	
INTERPRETED BY	The residual prostate was mild to moderately enlarged exhibiting non-homogenous to mixed echogenic parenchyma. A ventral intraparenchymal cyst vs nodule was present measuring ~ 1.4 cm in diameter. No definitive evidence of parenchymal mineralization. Suspect soft tissue echo within the proximal to prostatic urethra lumen present measuring 0.9 cm in diameter and potentially 3-4 cm in length. The post prostatic urethra was indistinctly visualized to a depth of 4 cm. The residual prostate measured ~ 4.0 cm in diameter.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
IMAGING PERFORMED BY	Adrenal Glands
Kelly Vazquez	The left adrenal gland was not definitively visualized. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.72 cm width at the caudal pole and 2.8 cm length.
HOSPITAL NAME	Spleen
Westwood Regional VH	The spleen exhibited normal size and minor capsule asymmetry. Generalized mild parenchymal heterogeneity was present with subtle non-disruptive hyperechoic splenic nodules adjacent to the hilus and within the medial spleen. No splenic tumors. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
REFERRING VET	Liver/Gallbladder
Dr. McConnell	The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. 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 and common bile duct were not definitively visualized.
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13504ag	
DATE	
04/17/2023	



PATIENT

Gastrointestinal

Cagney Spirer

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.

BREED

Pancreas

German Shepherd

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

MN

Free Abdomen

No omental masses or overt lymphadenopathy was present.

AGE

12yr

Minor anechoic free fluid was noted adjacent to the outer ventrocaudal urinary bladder and ventral to the residual prostate.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

76.6lb

- Distended urinary bladder with minor particulate sediment. No overt cystitis criteria or tumors.
- Enlarged non-homogenous focally cystic vs nodular residual prostate.
- Suspect soft tissue echo in the proximal/prostatic urethral lumen.
- Bilateral moderate chronic renal changes with mild bilateral hydronephrosis.
-

INTERPRETED BY

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

Secondary findings

- Mild hepatic parenchymal remodeling -benign.
- Age related splenic changes with subtle benign myelolipomas.

IMAGING PERFORMED BY

Kelly Vazquez

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Concern for residual prostate and suspect proximal/prostatic urethral neoplastic criteria which may include prostatic or urothelial carcinoma is warranted. Non-neoplastic etiology i.e., prostatitis/proximal urethritis is possible yet thought less likely.

HOSPITAL NAME

Westwood Regional
VH

Prostatic sampling via prostatic wash or ultrasound guided FNA/biopsy is recommended. No overt evidence of regional metastasis. The residual prostate and proximal urethral pathology are likely preventing full bladder emptying. A screening BRAF assay could also be considered.

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Dr. McConnell

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HOSPITAL NAME

Westwood Regional
VH

REFERRING VET

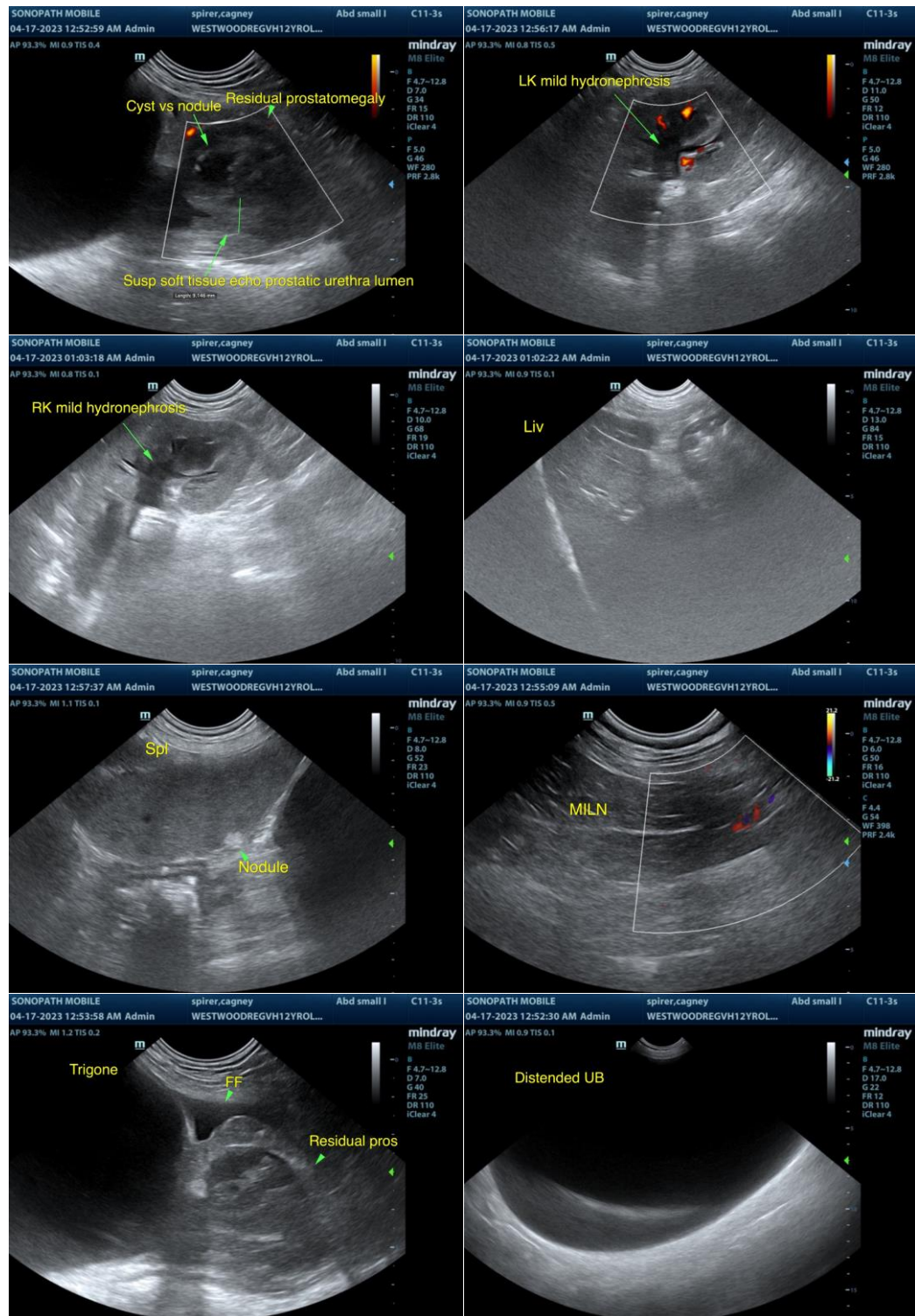
Dr. McConnell

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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



PATIENT

can be of any further assistance, please contact me.

Cagney Spirer

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German Shepherd

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