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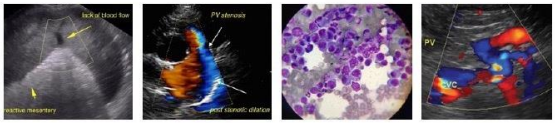


THE FOCAL ZONE
IMAGING PERFORMED BY
289-808-2608 info@thefocalzone.com

PATIENT

Stanley Wolf

SPECIES

Canine

BREED

French Bulldog

SEX

Neutered male

AGE

6 years

WEIGHT

31.8 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Dog & Cat Clinic of Niagara

REFERRING VET

Dr. Aziz

INVOICE

10295ag

DATE

04/04/2022

PRESENTING CLINICAL SIGNS

History: New client to us, hernia formed shortly after neuter. Owner considering scrotal ablation, but want ultrasound to confirm for inguinal hernia first. Has been on Cefaseptin and Cytopoint.

Abnormal PE/Chem/CBC/UA Results: n/a

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor particulate to hyperechoic to non-dependent 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 were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. Bilateral areas of pinpoint medullary mineral were noted. 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 pelvic dilation. The left kidney measured 5.1 cm in length. The right kidney measured 5.0 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate was free of pathology. No evidence of prostatic hyperplasia, measuring 0.73 cm in width.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm width at the caudal pole and 1.9 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.70 cm width at the caudal pole and 1.8 cm length.

Spleen

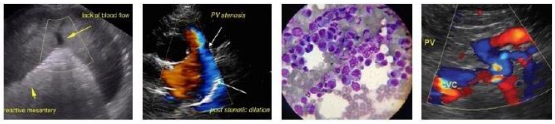
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute 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 mild to moderate nondependent gallbladder debris. 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.



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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.

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

Sonographic assessment of the left and right inguinal areas as well as the scrotum, revealed small unspecified structure in superficial left inguinal area exhibiting suspected pinpoint mineralization measuring approximately 2.6 cm x 1.1 cm. The structure did not appear to connect to the inner abdominal cavity. Overt sonographic abnormalities associated with the scrotum were not evident. No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Small unspecified structure exhibiting suspect focal mineralization in the superficial left inguinal area.
- Pinpoint renal medullary mineralization.
- Mild urinary bladder sediment.
- Mild gallbladder debris-likely incidental.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The structure in the superficial left inguinal canal was not overtly consistent with an inguinal hernia as it did not appear to connect to the inner abdominal cavity. Potential considerations may include focal mineralized superficial inguinal LN, focal area of inguinal nodular fat necrosis, granuloma or other. Given the lack of prostatic hyperplasia, a retained testicle is thought unlikely. If scrotal ablation is elected, incision over the superficial structure is recommended for further assessment and potential removal. Intraoperative ultrasound is likely ideal to identify the structure during surgery given its small size unless definitively palpable.

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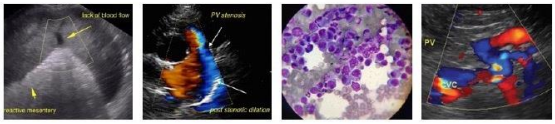

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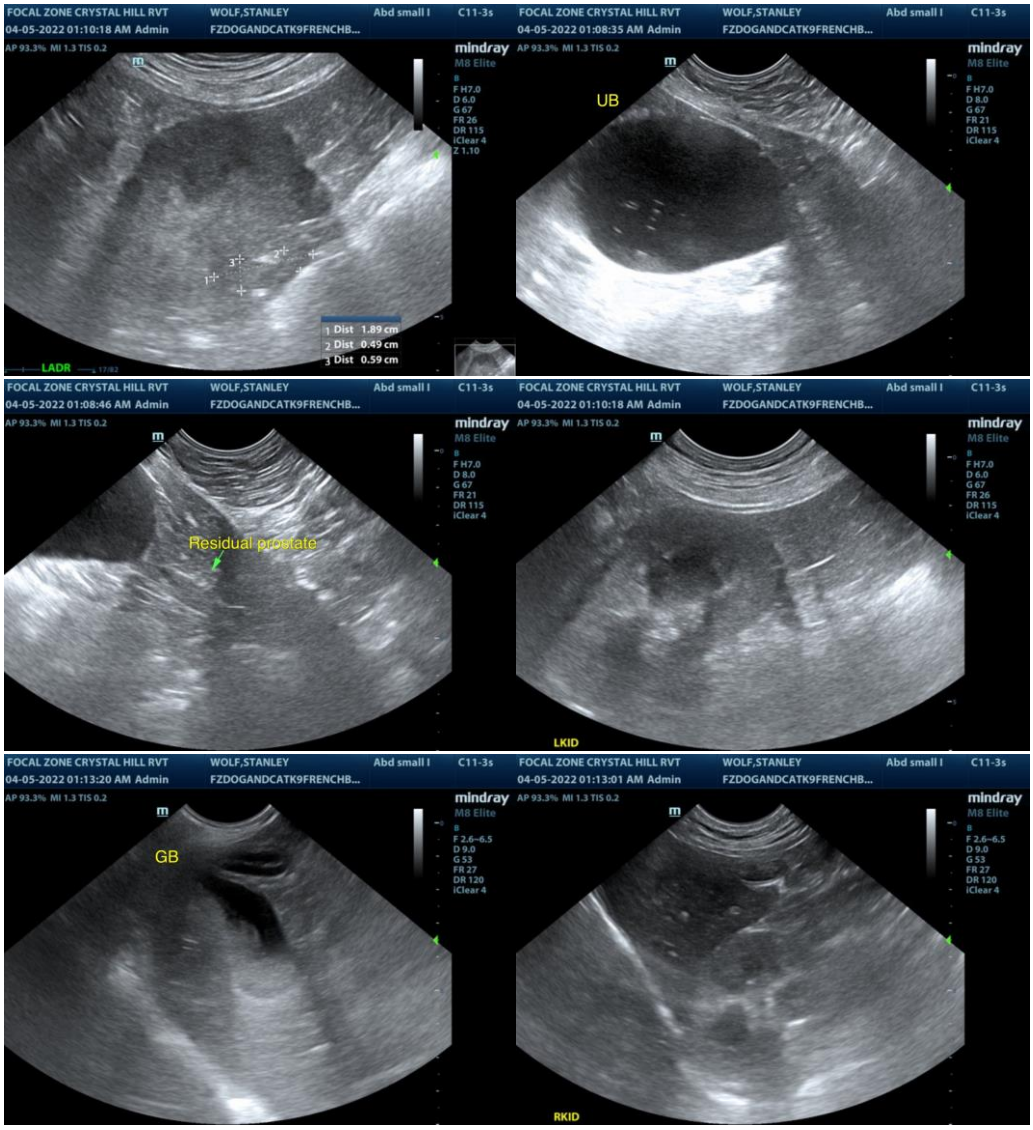

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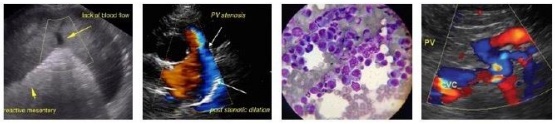

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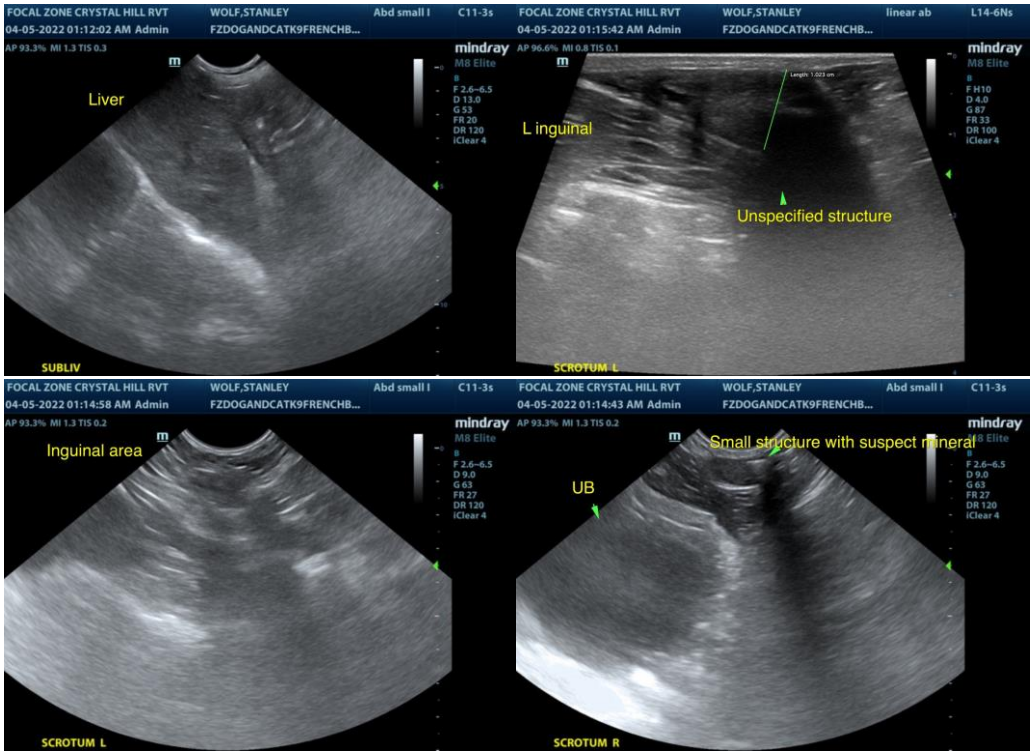

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com