



**PATIENT PRESENTING CLINICAL SIGNS**

Aston Kusher Beecham

**SPECIES**

Canine

**BREED**

Pit Bull

**SEX**

Neutered Male

**AGE**

6 Years

**WEIGHT**

74 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Countryside AC

**REFERRING VET**

Dr. Cox

**INVOICE**

15021

**DATE**

5/2/22

History: - Pt has been having inappropriate urination. He will urinate in different areas of the house. - First urinalysis was on 01/20/2022. We sent home antibiotics and anti-inflammatories. - Lateral Abdominal Radiograph 01/31/2022: No stones seen - Pt still urinating in the house. Follow-up urinalysis was normal. We sent with Fluoxetine but owner has not given consistently. - Urinalysis 04/05/2022. No UTI. Pt is continuing to inappropriately urinating so owner would like to go ahead with ultrasound to evaluate behavioral vs inflammatory vs neoplastic condition in bladder.

Abnormal PE/Chem/CBC/UA Results: - Urinalysis 01/20/2022: spgr >1.045, ph = 5, 33 wbc, >50 rbc, 3-5 squamous cells, >10 non-squamous cells - Urinalysis Follow Up 02/09/2022: spgr 1>1.045, ph = 7, < 1 wbc, < 1 rbc< 1 epi cell - Urinalysis 04/05/2022: spgr 1.066, ph = 7.5, 1+ protein, 1+ bilirubin, 1+ struvite crystals, rafts of epi cells.

**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. Aortic trifurcation was normal.

The residual prostate was of expected size and presentation without evidence of pathology, measuring 1.1 cm diameter. The visualized post-prostatic urethra exhibited normal structure and tone to a depth of 3.0 cm. The urethra measured 0.65 cm in width.

Normal size and margination were 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 pelvic dilation. The left kidney measured 7.4 cm in length. The right kidney measured 7.0 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 2.6 cm in length x 0.62 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 3.4 cm in length x 0.89 cm width at the caudal 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**



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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.

**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.

**ULTRASONOGRAPHIC FINDINGS**

- Sonographically unremarkable urinary bladder, residual prostate and visible proximal urethra
- Normal bilateral kidneys

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of lower urinary tract pathology, (i.e., cystitis, urinary bladder, residual prostate or proximal urethra neoplastic criteria, cystic calculi, etc.), as an obvious cause of the patients inappropriate urination.





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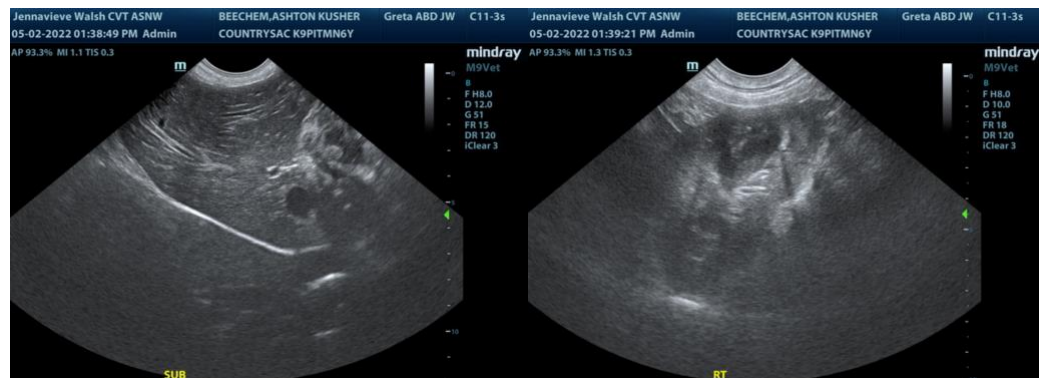
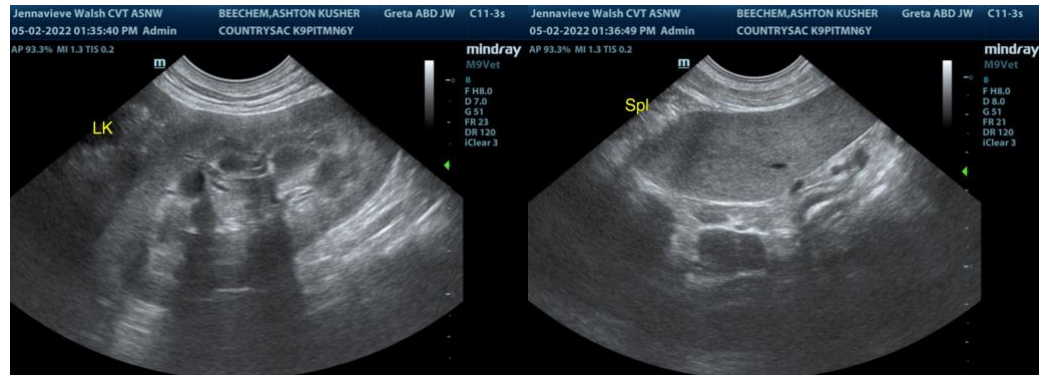
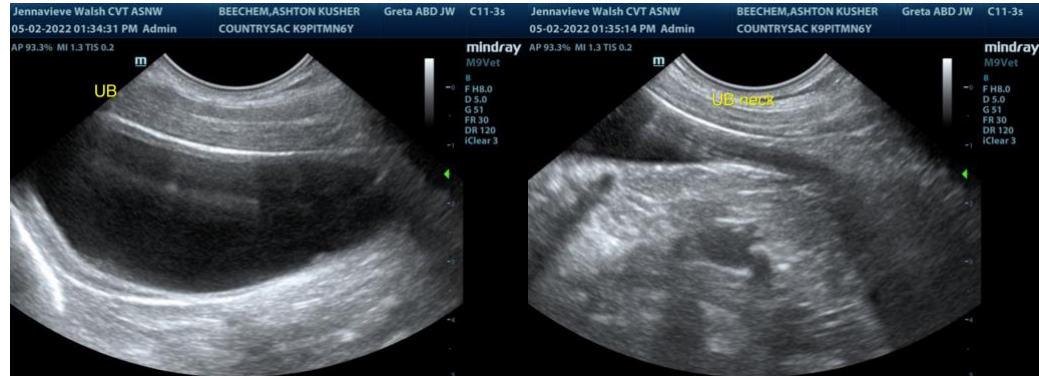
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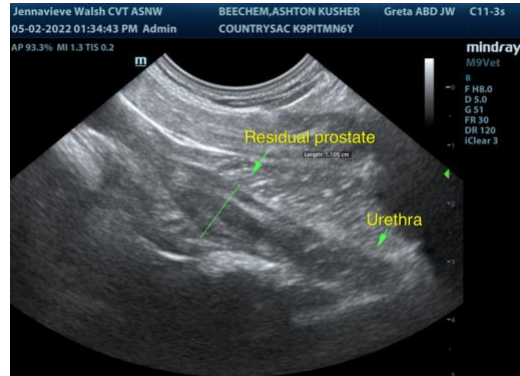
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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