



PATIENT PRESENTING CLINICAL SIGNS

Peanut Lawton History: Recent cystotomy to remove large stone. Smaller stones left in place. Assess bladder and kidneys for obstruction.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED The urinary bladder was subnormal in size owing to lack of urine distention. Minimal anechoic urine was present in the lumen. Generalized subjective moderately thickened bladder walls exhibiting minor asymmetrical luminal contour was present. The ventral urinary bladder wall measured up to 0.7 cm in width. Pinpoint to focal areas of nonobstructive dependent to potentially adhered residual bladder mineral was present. A focal area of hyperechoic bladder mural echogenicity suggestive of area of previous cystotomy was noted. No evidence of peripheral bladder inflammation. The proximal urethra was ill visualized yet was without overt evidence of obvious urethritis or retained urine.

King Charles Spaniel

SEX Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The bilateral kidneys exhibited pinpoint to focal areas of medullary mineral. 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 4.0 cm in length. The right kidney measured 4.2 cm in length.

FS

AGE

3 years

The area of the aortic trifurcation was free of pathology.

WEIGHT

8.9 kg

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.32 cm width at the caudal pole and 0.35 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 0.27 cm width at the caudal pole and 0.32 cm width at the cranial pole.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Dave Stasiuk

HOSPITAL NAME

Liver

Resolution Veterinary
Ultrasound

The liver was subjectively normal in size, structure, and contour and exhibited normal volume. 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. No overt evidence of a portosystemic shunt. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Zhao

Gastrointestinal

INVOICE

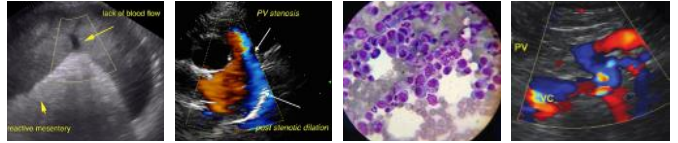
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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

DATE

06/17/2022

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.



PATIENT Normal visible colon wall layers were present with apparent formed feces in lumen.

Peanut Lawton **Pancreas**

SPECIES 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.

Canine

Free Abdomen

BREED No overt lymphadenopathy or peritoneal effusion was present.

King Charles Spaniel

ULTRASONOGRAPHIC FINDINGS

SEX

FS

AGE

3 years

- Subnormal urinary bladder size with generalized moderate thickened wall, mild residual nondependent to adhered luminal mineral
- Bilateral mild pinpoint to focal nonobstructive renal medullary mineral-no evidence of pyelectasia
- Sonographically unremarkable liver

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

8.9 kg

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The subnormal UB size is not consistent with urethral obstructive criteria which also prevented full evaluation of the UB walls however some degree of persistent cystitis is suspected. No evidence of UB neoplastic criteria was present. Potentially this patient may be passing small amounts of mineral from the kidneys into the UB. No evidence of ureteral obstruction and/or hydronephrosis. Depending on stone analysis, urinary dissolution diet as well as continued therapy for probable persistent cystitis is recommended. A urine C/S on a sterile urine sample is suggested if not already done.

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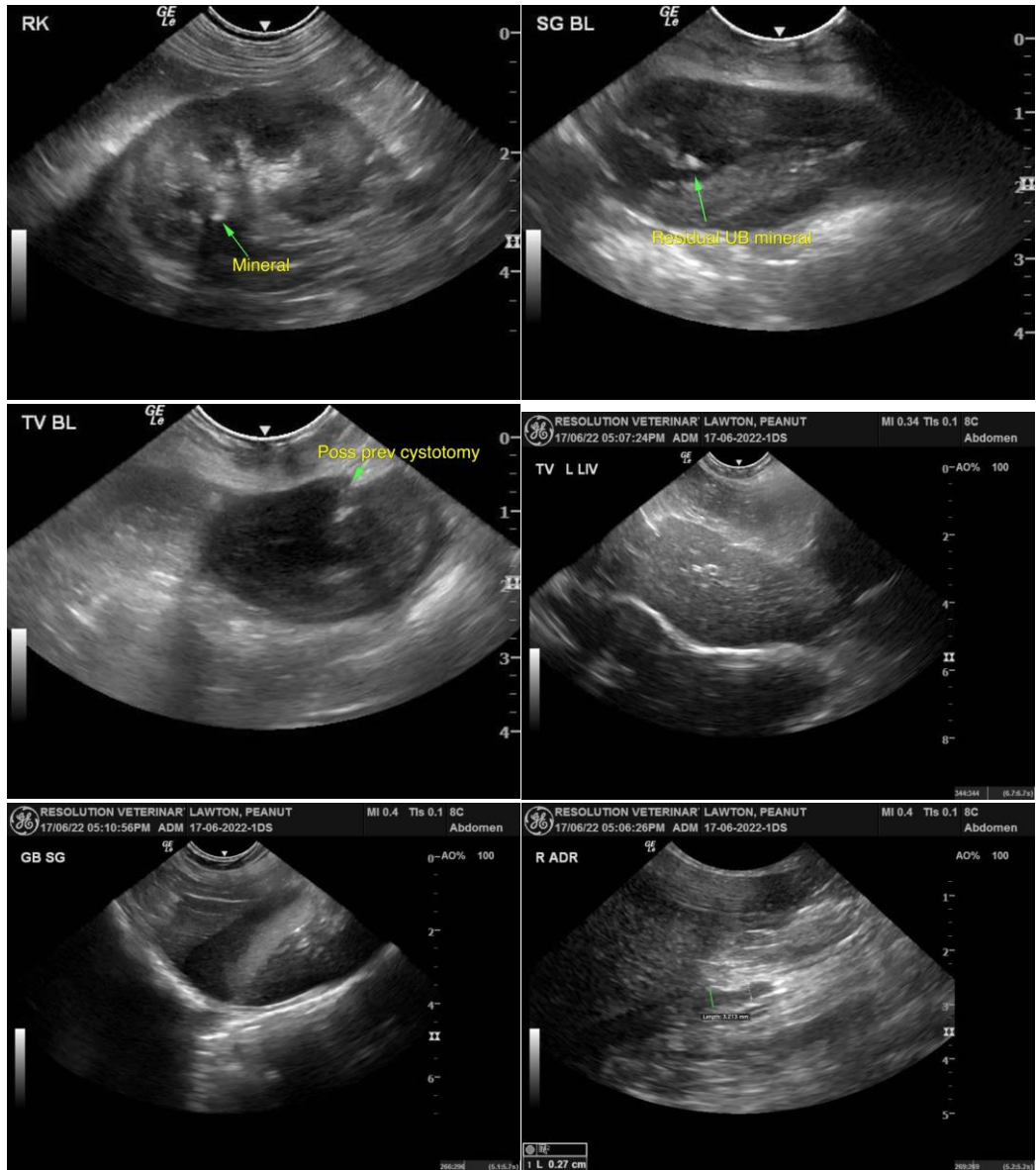
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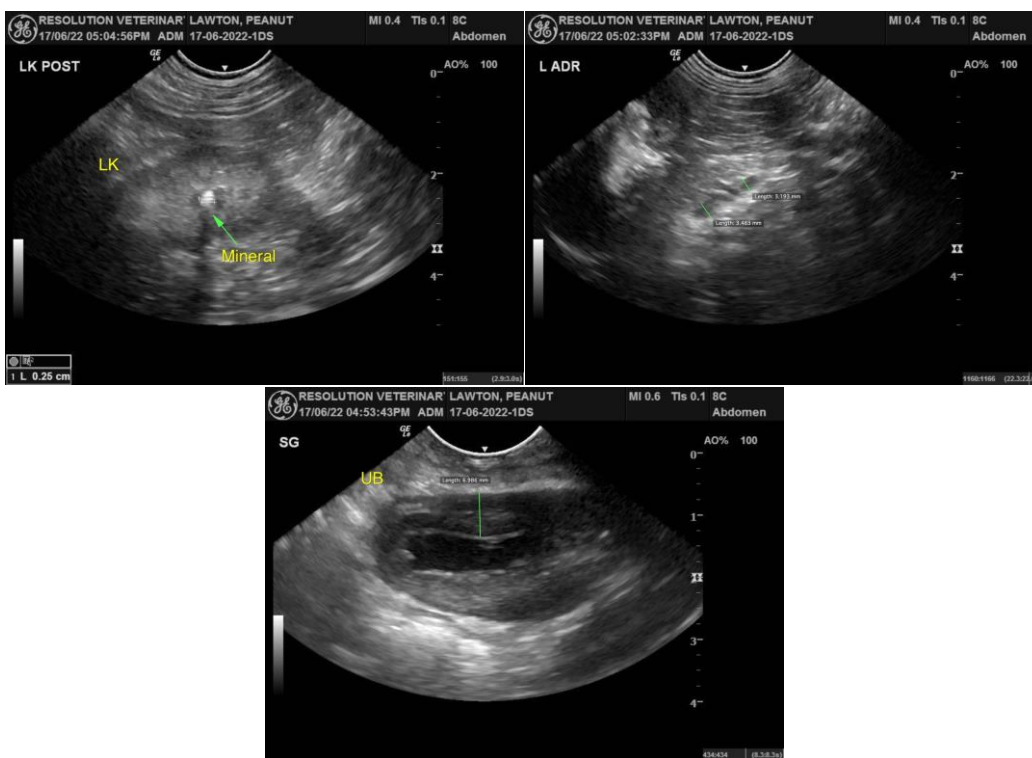
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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