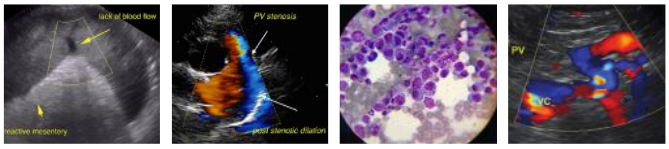
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Vazquez

SPECIES

Canine

BREED

Pit Bull

SEX

M/I

AGE

13 years

WEIGHT

56 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Cruz

INVOICE

17192

DATE

6/29/23

PRESENTING CLINICAL SIGNS

Presented as a referral for an abdominal ultrasound. Started having urinary problems about a week and a half ago. Stated having hematuria and having difficulty urinating throughout the week. The patient has lost appetite and hasn't been evacuating or urinating. Treatment with ciprofloxacin and prednisone. Hx: Urinary Obstruction Azotemia Prostatitis Hematuria Vomiting Heart Murmur Grade IV The patient has had a urinary catheter since 6-23-23 until today 6-29-23. Has been on Unasyn IV since Monday 6-26-23

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone with sonographically unremarkable urinary bladder wall without evidence of overt inflammatory mural criteria. No urinary bladder tumors were noted. Anechoic urine was present with mild dependent to non-dependent particulate sediment. The area of the trigone and cystourethral junction were free of obstructive pathology. No evidence of calculi was noted. The urethra exhibited overtly normal structure and tone to a depth of 3.0 cm.

The residual prostate was mildly enlarged with mild irregular capsule contour and nonhomogeneous to cystic parenchyma. No evidence of prostatic parenchymal mineralization. The prostate measured 4.7 cm x 3.3 cm.

Multiple medial iliac lymph nodes were noted adjacent to the iliac trifurcation. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by echogenic to reactive mesentery. An example measured 4.0 cm x 2.0 cm.

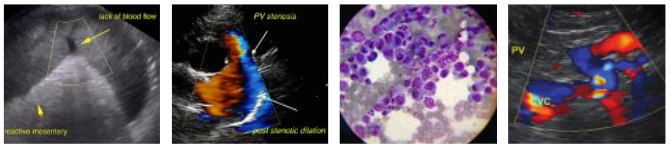
Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. Mild bilateral pyelectasia was present. A left kidney solitary small cortical cyst was present. The left kidney measured 7.0 cm in length. The right kidney measured 7.3 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 3.2 cm length x 0.63 cm width at the caudal pole. The right adrenal gland exhibited subjective irregular enlargement with potential parenchymal expansion into the area of the right phrenic vein. Subtle nonhomogeneous hypoechoic parenchyma was present. The area of potential parenchymal expansion measured ~1.2 cm in diameter. The overall right adrenal gland measured 2.3 cm length x 0.73 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.



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Vazquez

SPECIES

Canine

BREED

Pit Bull

SEX

M/I

AGE

13 years

WEIGHT

56 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Cruz

INVOICE

17192

DATE

6/29/23

Liver/ Gallbladder

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. A solitary, subtle, hypoechoic, nondisruptive, intraparenchymal nodule was present measuring 1.1 cm diameter in the ventral mid liver. The gallbladder was non-distended in size containing primarily anechoic content with mild gallbladder sediment. 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 were evident.

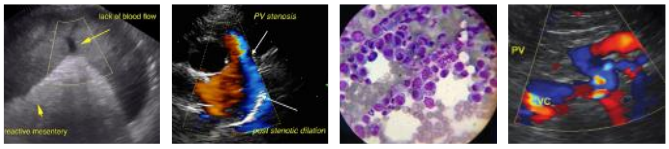
Free Abdomen

No overt omental lymphadenopathy, peritoneal effusion, or omental masses were present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Sonographically unremarkable urinary bladder with mild sediment
- Mildly enlarged, nonhomogeneous to cystic prostate - benign prostatic hyperplasia with parenchymal cyst, potential for prostatitis, no overt prostatic neoplastic criteria
- Mild chronic renal changes with mild bilateral pyelectasia
- Hypoechoic to swollen medial iliac lymphadenopathy - neoplastic vs. inflammatory lymphadenopathy suspected
- Sonographically unremarkable gastrointestinal tract
- Subjective irregularly enlarged right adrenal glands with parenchymal expansion into the area of the phrenic vein, possible overlaying lymph node



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Vazquez

SPECIES

Canine

BREED

Pit Bull

SEX

M/I

AGE

13 years

WEIGHT

56 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Cruz

INVOICE

17192

DATE

6/29/23

Secondary Findings

- Mild hepatomegaly with nonspecific yet subjective benign intraparenchymal nodule - suspect vacuolar hepatopathy pattern with subtle hyperplasia, hematopoiesis or similar, infiltrative or neoplastic hepatic neoplasia thought less likely
- Minor gallbladder sediment (non-mucocele)

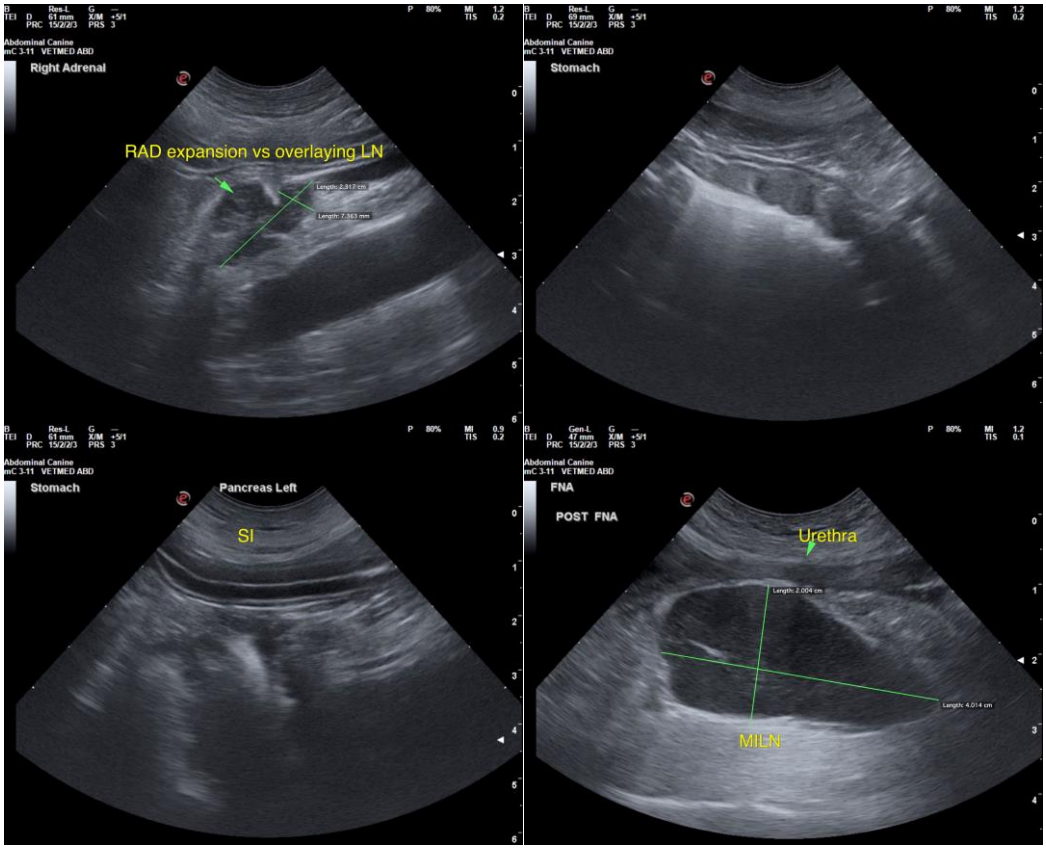
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation of the medial iliac lymph node and prostatic appearance with pending cytology is recommended.

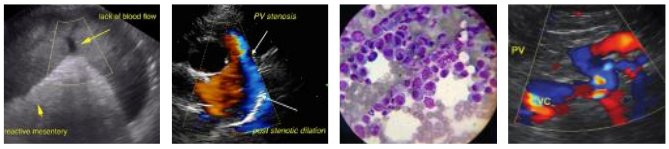
Sonographically, the degree of prostatomegaly is not overtly consistent with expected prostatic urinary obstruction. Even on current antibiotics, urine C/S may be considered to assess for underlying resistant infection.

Strong concern for emerging right adrenal neoplastic criteria with phrenic vein invasion. Screening BP is recommended to assess for evidence of hypertension, which may allude to a right pheochromocytoma.

Abdominal CT if possible is likely ideal for further clarification of the right adrenal gland and non-visualized urethral abnormalities. As-needed gastrointestinal support is recommended.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Jack Vazquez

SPECIES

Canine

BREED

Pit Bull

SEX

M/I

AGE

13 years

WEIGHT

56 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

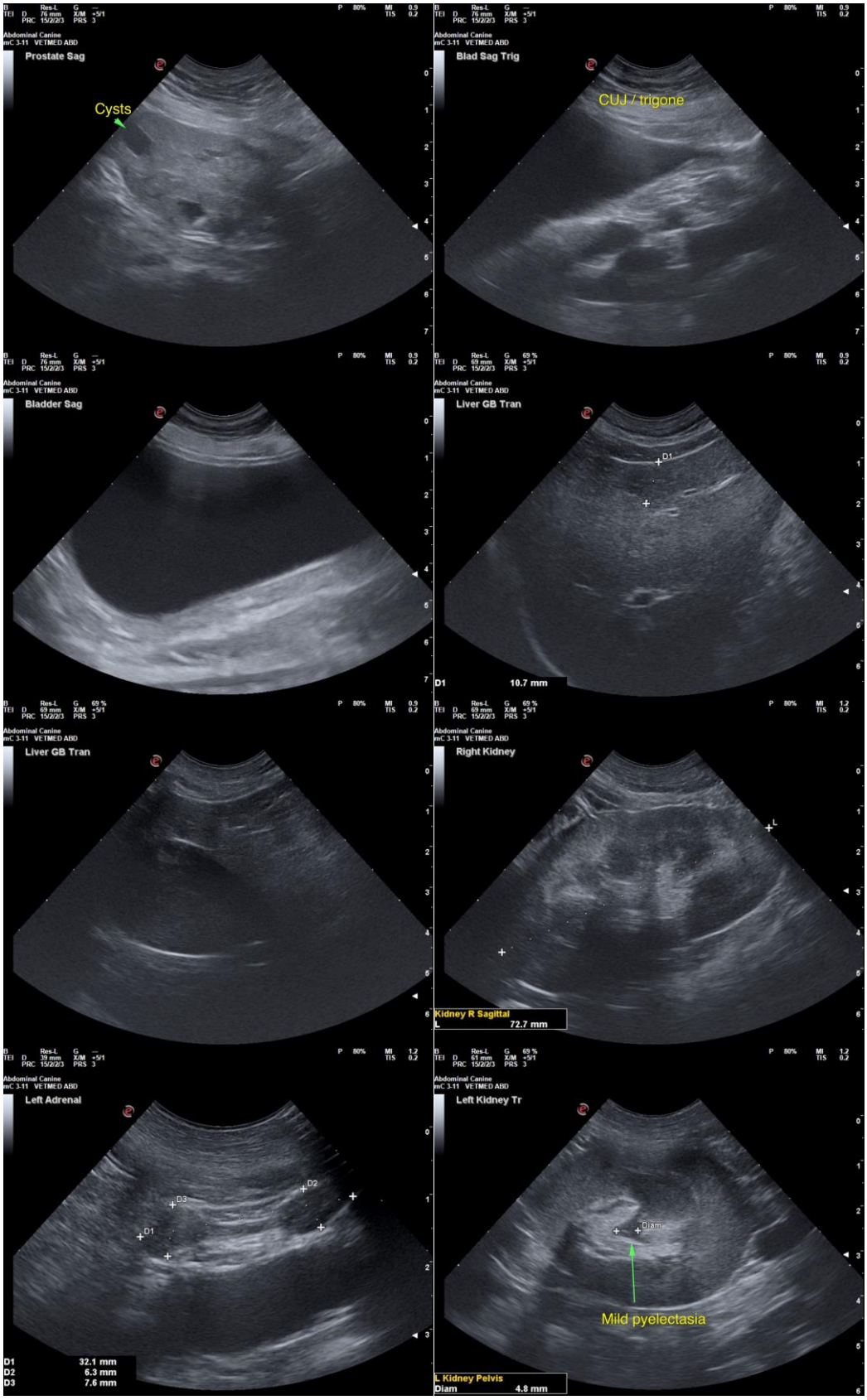
Dr. Cruz

INVOICE

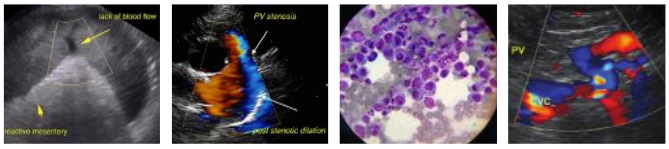
17192

DATE

6/29/23



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Vazquez

SPECIES

Canine

BREED

Pit Bull

SEX

M/I

AGE

13 years

WEIGHT

56 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Cruz

INVOICE

17192

DATE

6/29/23

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