



**PATIENT PRESENTING CLINICAL SIGNS**

Travis Mosier History of urinary bladder stones, hematuria. Medication: mirtazapine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SPECIES**

Canine

**Urinary System**

The urinary bladder is normal in overall size and tone. Mild thickened dorsal and ventral caudal trigone wall extending into the cystourethral junction was present. Anechoic urine was present in the lumen with minor non-dependent particulate sediment and multiple dependent small lumen calculi.

**BREED**

Miniature Schnauzer

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. Mild to moderate non-obstructive medullary mineral and renolithiasis was present. The left kidney measured 5.5 cm in length. The right kidney measured 6.5 cm in length.

**SEX**

MN

**AGE**

2011

The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy or masses.

**WEIGHT**

27.9

The prostate gland was markedly enlarged in size. Mild irregular contour was noted with non-homogenous parenchyma exhibiting multifocal areas of pinpoint medullary mineral. A large cyst occupying the majority of the central aspect of the prostate was present. The prostate measured 5-6 cm in diameter. Subjectively thickened post prostatic urethra was present to a depth of 2 cm.

**Adrenal Glands**

**INTERPRETED BY**

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

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 0.49 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 0.50 cm width at the caudal pole and 0.36 cm width at the cranial pole.

**IMAGING**

**PERFORMED BY**  
Rebekah Jakum, CVT  
ARDMS/RVT

**Spleen**

The spleen exhibited subjective enlargement with symmetrical capsule contour and a finely textured and heterogenous parenchyma. Several non-disruptive well demarcated hyperechoic nodules were present in the medial spleen and adjacent to the hilus.

**HOSPITAL NAME**

The Village  
Veterinarian

**Liver/Gallbladder**

The liver was enlarged with areas of capsule asymmetry and generalized moderately non-homogenous parenchyma. Parenchyma remodeling was present. No overtly visualized hepatic mass. The gallbladder was distended in size with thin walls and primarily anechoic luminal content with moderate congealed non-organized hyperechoic sediment. The cystic and common bile ducts were normal.

**REFERRING VET**

Longenecker

**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.

**INVOICE**

14516ag

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.

**DATE**

08/08/2023

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



**PATIENT** *Pancreas*

Travis Mosier The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age related changes and considered incidental. No signs of active inflammation or neoplasia.

**SPECIES** *Free Abdomen*

Canine No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**BREED** **ULTRASONOGRAPHIC FINDINGS**

Miniature Schnauzer

- Non-distended urinary bladder with multiple small dependent lumen calculi, thickened caudal trigons and cystourethral junction.
- Enlarged non-homogenous to mineralized cystic prostate gland.
- Chronic renal changes with non-obstructive medullary mineral/nephrolithiasis.
- Enlarged non-homogenous liver.
- Moderate congealed gallbladder sediment-possible immature mucocele.

**SEX**

MN

**AGE** *Secondary*

- Benign splenic nodules-consistent with myelolipomas

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

27.9

Given that the patient is neutered with evidence of prostatomegaly with parenchymal mineralization, prostatic neoplastic criteria with strong concern for extension into the area of the urinary bladder neck and potentially the post prostatic urethra is considered probable. No obvious evidence of lower urinary tract obstruction given lack of significant urinary bladder distention. This patient may be passing small amounts of mineral from the kidneys into the lower urinary tract. Prostatic sampling via biopsy would be required for a definitive diagnosis. No evidence of metastatic criteria. Significant residual chronic prostatitis is considered less likely.

**INTERPRETED BY**

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

Sonographically the liver is consistent with previous cytological assessment. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

The Village  
Veterinarian

**REFERRING VET**

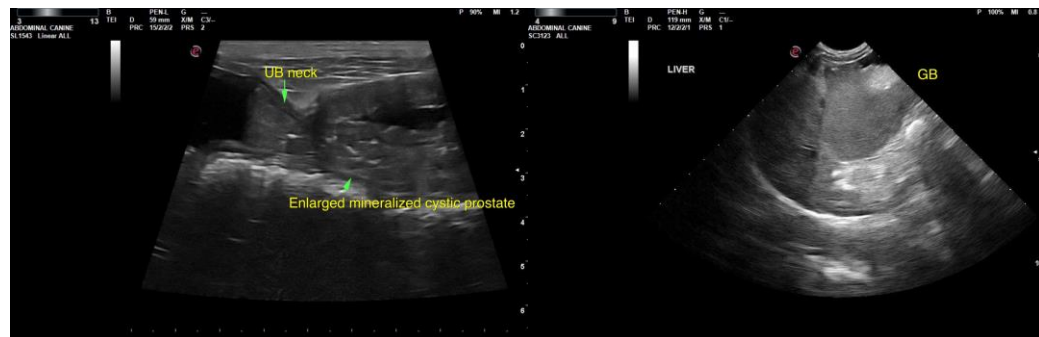
Longenecker

**INVOICE**

14516ag

**DATE**

08/08/2023





**PATIENT**

Travis Mosier

**SPECIES**

Canine

**BREED**

Miniature Schnauzer

**SEX**

MN

**AGE**

2011

**WEIGHT**

27.9

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

The Village  
Veterinarian

**REFERRING VET**

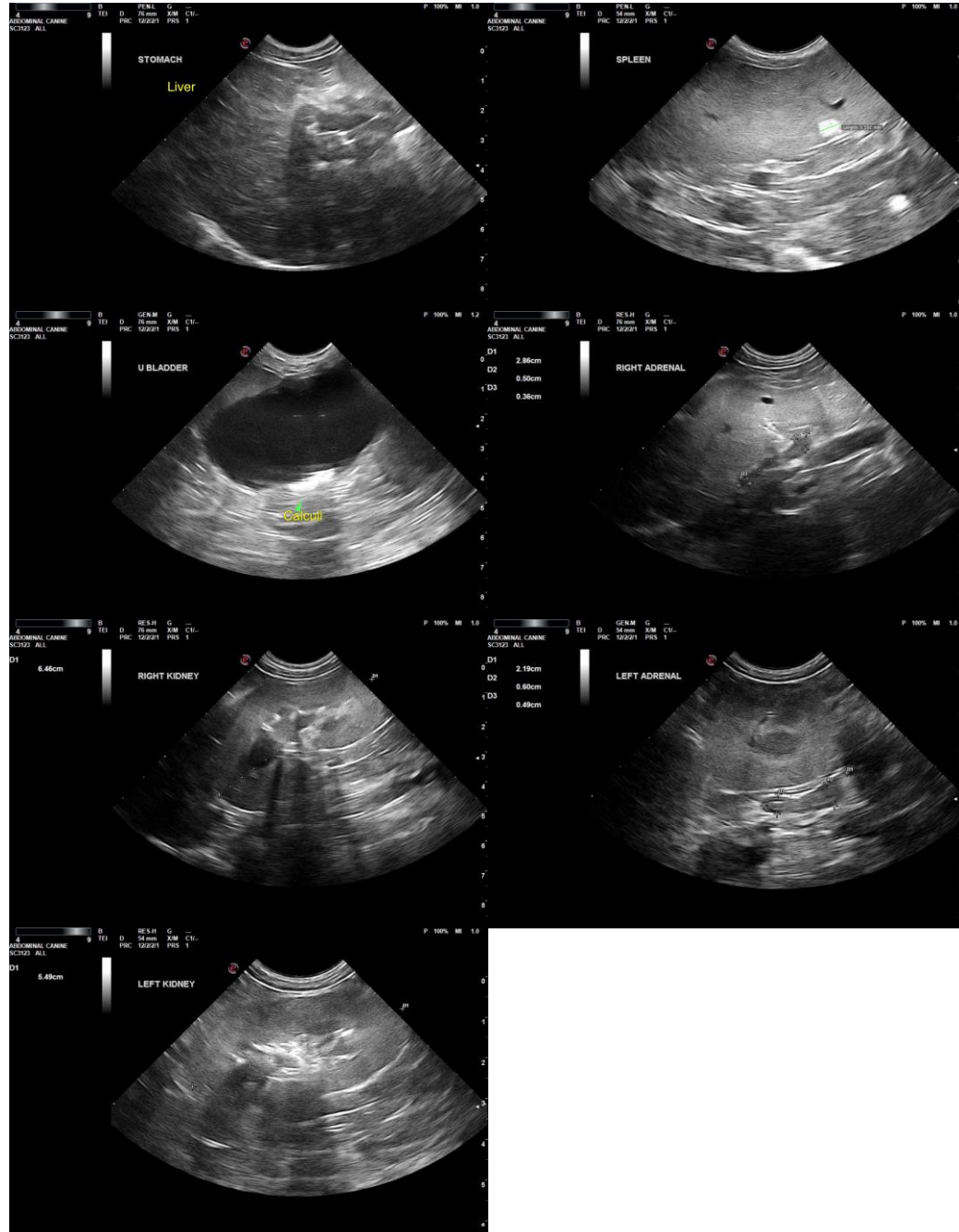
Longenecker

**INVOICE**

14516ag

**DATE**

08/08/2023



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](mailto:info@sonopath.com)



**PATIENT**

Travis Mosier

**SPECIES**

Canine

**BREED**

Miniature Schnauzer

**SEX**

MN

**AGE**

2011

**WEIGHT**

27.9

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

The Village  
Veterinarian

**REFERRING VET**

Longenecker

**INVOICE**

14516ag

**DATE**

08/08/2023