



PATIENT

Harry McDonald

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Male intact

AGE

14 Y

WEIGHT

14.16 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Cottage Grove VC

REFERRING VET

Dr. Damewood

INVOICE

14932

DATE

9/21/22

PRESENTING CLINICAL SIGNS

Presented for urinary "accidents", licking at penis. Left testicle enlarged (twice the size of Rt), prostate enlarged but smooth and non-painful. Attempted cysto- large cystic structure apparently not bladder- 3 separate attempts to draw recovered no urine. Catheterized, removed < 1ml of urine. Current Medications Started Baytril 9/20
Abnormal PE/Chem/CBC/UA Results: UA (cath) SG 1.032, pH 5.0 Leuk 100, prot 500, blood 250 Direct exam: RBCs, leuks, no crystals

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was subnormal to contracted in appearance owing to lack of urine distention. Full evaluation of the urinary bladder walls was limited owing to lack of urine distention. No overt evidence of neoplastic criteria or luminal calculi was noted.

The prostate was enlarged in size with intact, primarily symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was heterogeneous with a mixed pattern of varying echogenicity without evidence of parenchymal mineralization. Minor to subtle intraparenchymal cysts were present. The prostate measured 6.0 cm x 4.0 cm. Subtle evidence of periprostatic inflammation was noted.

The area of the aortic trifurcation was free of pathology including no overt evidence of medial Iliac or sublumbar lymphadenopathy/masses.

A large cystic structure was present in the area of the left kidney exhibiting potential for two separate chambers. The cranial-oriented possible chamber appeared to contain anechoic fluid, while a larger, potentially encapsulated caudal-oriented chamber contained fluid exhibiting suspended echogenic component suggestive of cellularity. The larger, potentially chambered caudal component of the cystic structure measured approximately 5.6 cm in diameter. Evidence of associated left retroperitoneal inflammation with potential for scant retroperitoneal free fluid extending caudally to the potential level of the iliac trifurcation was noted.

Normal size and margination were present in the right kidney. A normal 1:3 cortex / medulla ratio was maintained. Intact corticomedullary architecture was present with moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pyelectasia was noted. right kidney measured 5.3 cm in length.

Adrenal Glands

The left adrenal gland was not definitively visualized owing to associated left kidney to left retroperitoneal pathology. Potential for mildly prominent to hypoechoic regional lymphadenopathy is possible. The right adrenal gland was not definitively visualized. No overt pathology was noted in the area of the right adrenal gland.



PATIENT

Harry McDonald

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Male intact

AGE

14 Y

WEIGHT

14.16 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Cottage Grove VC

REFERRING VET

Dr. Damewood

INVOICE

14932

DATE

9/21/22

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. The caudal medial aspect of the spleen appeared to directly efface the cystic structure in the area of the left kidney, without overt involvement or infiltration.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing moderate, nondependent, mildly congealed, variably hyperechoic debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. 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 pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This is likely consistent with age-related pancreatic changes and incidental.

Free Abdomen

No omental masses or overt evidence of peritoneal free fluid were noted.

Both the left and right testicles exhibited intact architecture with homogeneous parenchyma and discernable mediastinum testes. The left testicle was mild to moderately enlarged compared to the right. The left testicle measured 2.2 diameter. The right testicle measured 1.6 cm in diameter.

ULTRASONOGRAPHIC FINDINGS

- Prostomegaly exhibited nonhomogeneous hyperechoic to mildly cystic parenchyma - benign prostatic hyperplasia vs. prostatitis, no overt evidence of prostatic neoplasia which is considered unlikely



PATIENT

Harry McDonald

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Male intact

AGE

14 Y

WEIGHT

14.16 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Cottage Grove VC

REFERRING VET

Dr. Damewood

INVOICE

14932

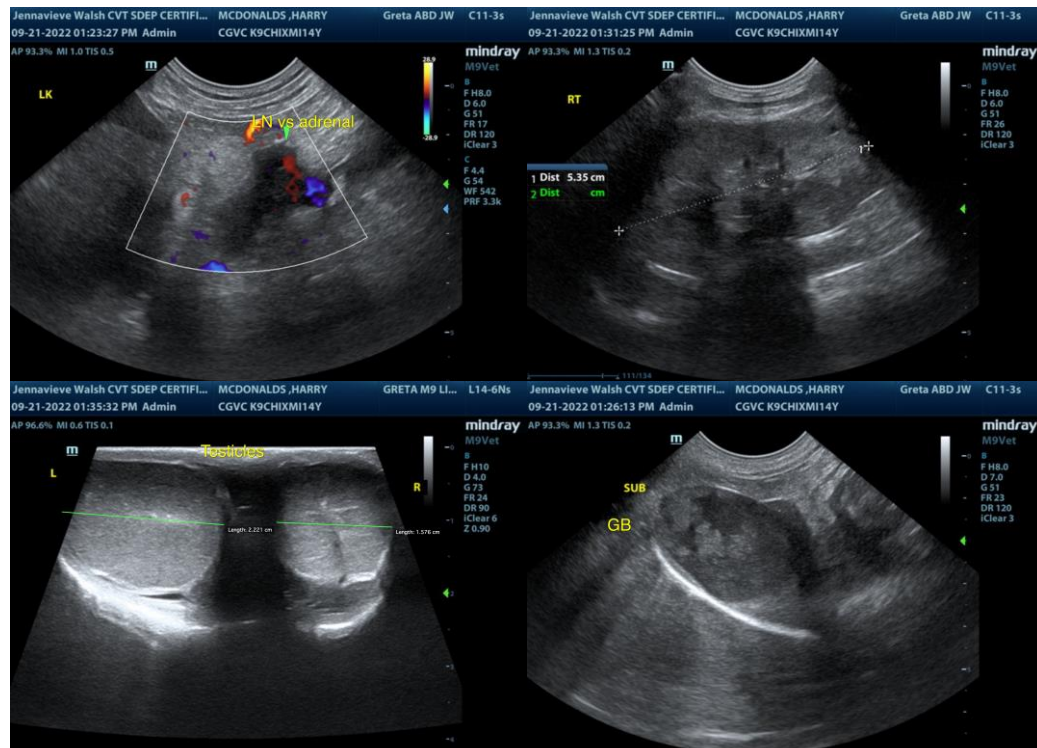
DATE

9/21/22

- Large fluid filled structure area of left kidney- left kidney abscess, necrosis, pyonephrosis, chronic severe hydronephrosis +/- concurrent renal cyst, neoplasia, are all potentials
- Right kidney moderate chronic renal changes exhibiting intact architecture
- Moderate gallbladder debris - possible early / emerging gallbladder mucocele
- Mildly prominent yet overtly normal left testicle

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Abdominal CT for further assessment of the large cystic structure in the area of the left kidney, as well as further assessment of the left retroperitoneal space, is recommended if possible. Potential left nephrectomy along with neutering may be considered, pending additional assessment and surgical planning. Three-view chest radiographs are suggested if not done.





PATIENT

Harry McDonald

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Male intact

AGE

14 Y

WEIGHT

14.16 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Cottage Grove VC

REFERRING VET

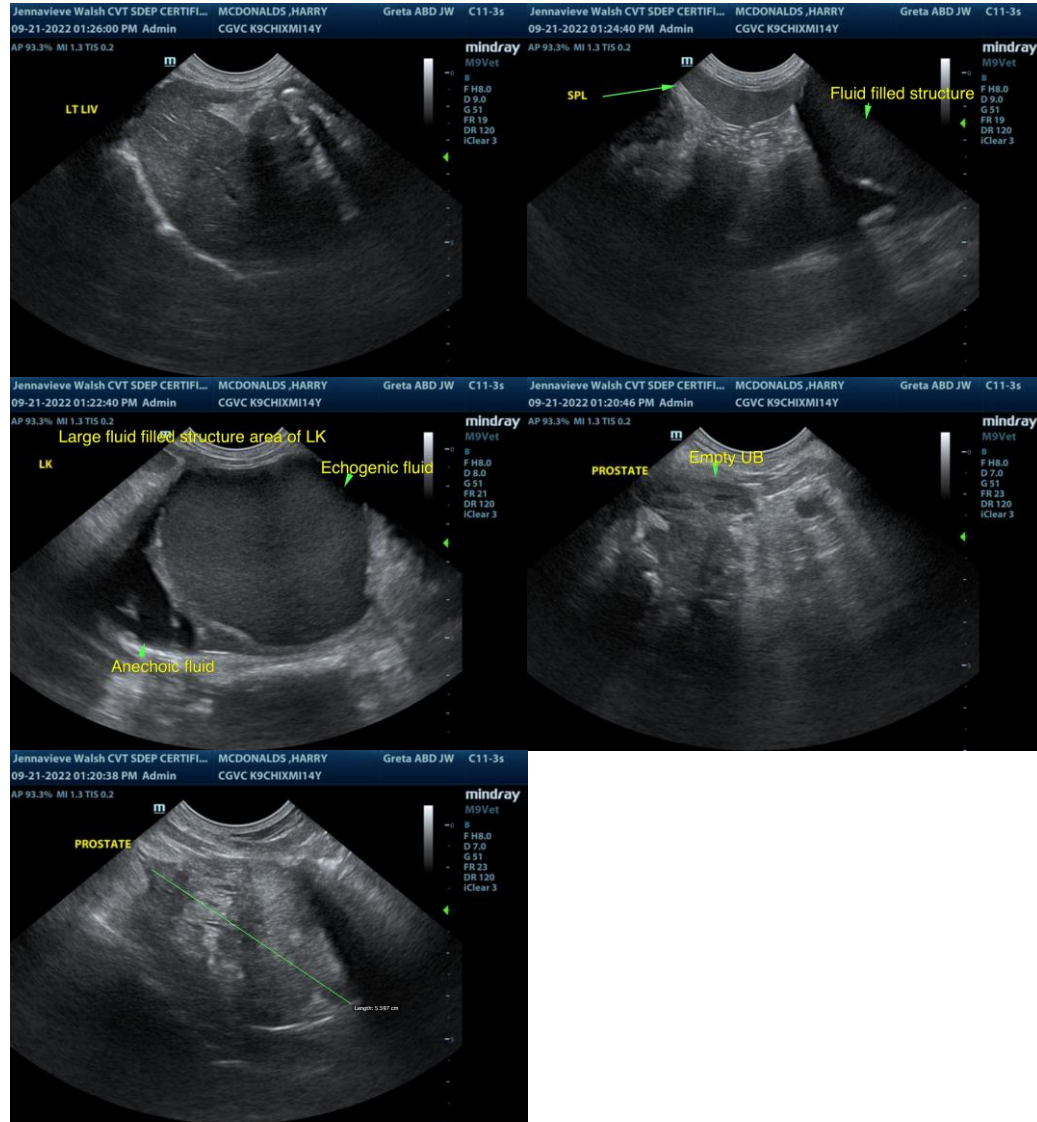
Dr. Damewood

INVOICE

14932

DATE

9/21/22



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