

## PATIENT

Murdock Maravi

## SPECIES

Canine

## BREED

Bulldog

## SEX

Male

## AGE

2019

## WEIGHT

70 lbs

## INTERPRETED BY

Remo Lobetti, BVSc,  
MMedVet (Med), PhD,  
Dipl. ECVIM (Internal  
Medicine)

## IMAGING PERFORMED BY

Denise Bruno, LVT,  
RDMS

## HOSPITAL NAME

Kenilworth AH

## REFERRING VET

Dr. Mansour

## INVOICE

70354

## DATE

1/20/26

## PRESENTING CLINICAL SIGNS

- High globulin. Evaluate abdomen for neoplasia. Labs attached

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder is full with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size, architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. The left kidney measured 6.7 cm. The right kidney measured 6.3 cm. Normal color flow pattern is evident in both kidneys.

The prostate is symmetrically enlarged with a diffuse, increased echogenic appearance and a regular curvilinear capsule. The prostate measures 2.5 x 4.9 cm in size. Normal appearance of the periprostatic tissue. Normal size and appearance of both testicles. The left testicle measured 3.4 cm in length and the right testicle measured 3.5 cm in length.

### *Adrenal Glands*

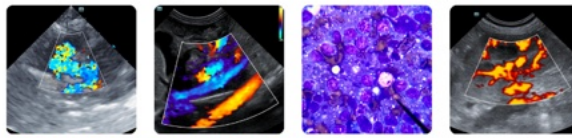
Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. The left adrenal gland measured 2.81 cm in length x 0.53 cm and 0.55 cm in width. The right adrenal gland measured 2.11 cm in length 0.54 cm and 0.52 cm in width.

### *Spleen*

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 1.6 cm in width.

### *Liver*

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.



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**Gallbladder**

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

**Gastrointestinal**

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. The small intestine measured 0.41 cm. A moderate amount of ingesta is present in the stomach with some shadowing material also evident.

**Pancreas**

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**Free Abdomen**

Normal mesenteric lymph nodes.

No ascites evident.

**ULTRASONOGRAPHIC FINDINGS**

- Prostatomegaly.
- Ingesta filled stomach.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The most likely etiology for the prostatomegaly would be benign prostatic hyperplasia.

As the patient has been fasted prior to the ultrasound the ingesta within the stomach can be considered abnormal representing gastric hypomotility or possibly a small gastric foreign body.

Further assessment and therapy needs to be based on the patient's presenting clinical signs and clinical assessment.



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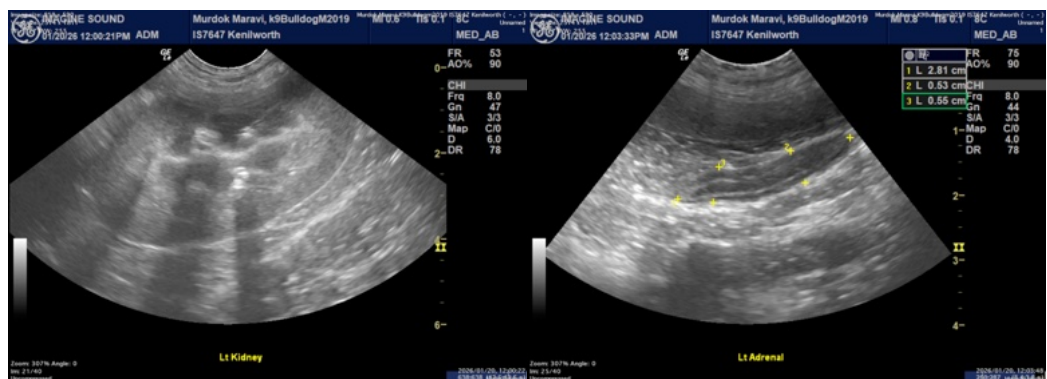
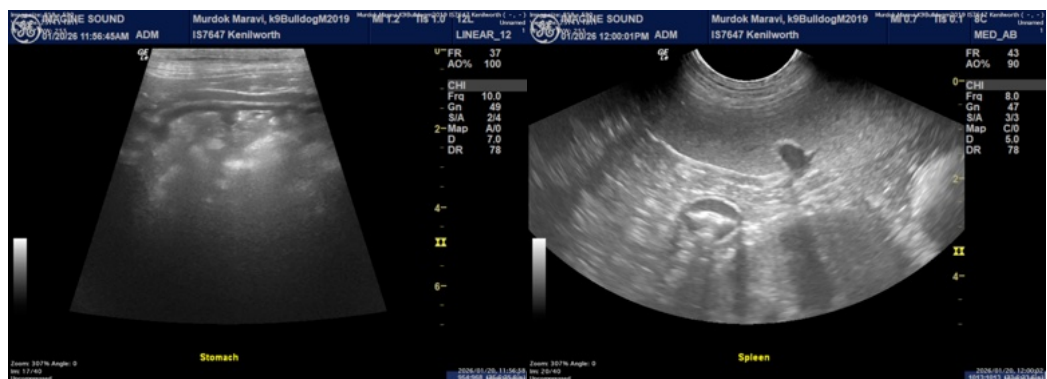
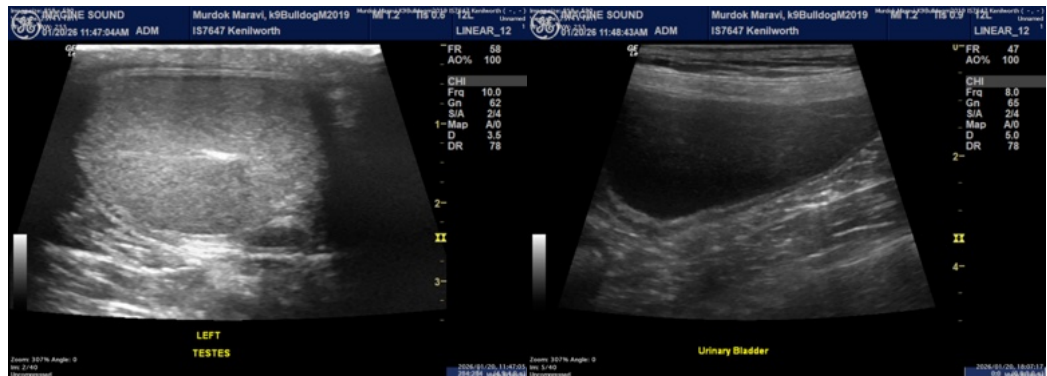
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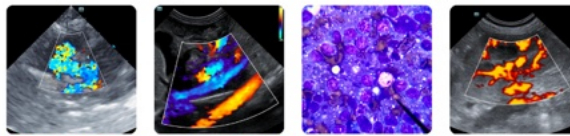
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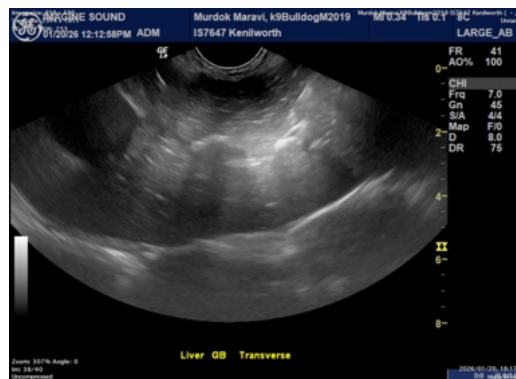
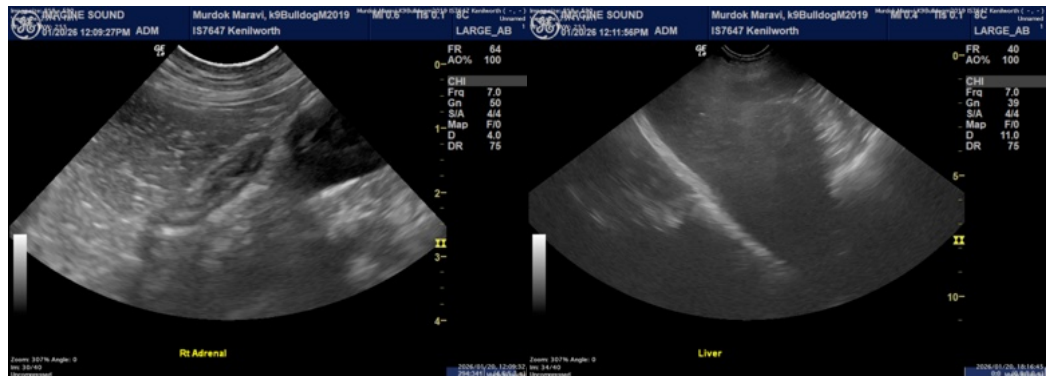
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

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