



PATIENT PRESENTING CLINICAL SIGNS

Can Blacky Unidad
Canina Policia de PR

History: Patient presented as a referral for an abdominal ultrasound to evaluate history of hematuria. The hematuria started about 1-2 yrs ago. It was then recommended to neuter at another clinic and even after neuter the patient continue to have hematuria. PT is not currently on any medication except for monthly prevention. Pt works well, eats and drinks well. No other major concerns.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: The PE did not show any major abnormalities that will explain the hematuria. No diagnostics tests were available to be evaluated as pt is new to the clinic.

BREED

Belgian Shepherd

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary system

SEX

Neutered Male

The urinary bladder shows a prominent layering of the wall which is significantly and diffusely thickened presenting transverse diameters of up to 0.61 cm. Trigone und pelvic urethra present normal findings without evidence of uroliths or sediment. The prostate is inconspicuous. Ureters are not visualized and considered to be normal.

AGE

7 years

Both kidneys are normal with the left kidney measuring 7.32 cm in length and the right kidney 7.66 cm. There is a clear corticomedullary definition. Renal pelvises and exit to the ureters are unremarkable.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

Adrenal glands

Both adrenal glands are considered to be normal.

Spleen

Splenic margins are mildly rounded. There are multiple hypoechoic partially ill-defined areas beside some clearly defined, hypoechoic and nodule-like lesions causing a heterogeneous echogenic texture. Nodules show diameters of 1.0 x 1.2 cm. Protrusion of the splenic surface is not recognized. Splenic vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins.

HOSPITAL NAME

Paseos VC

Liver/Gallbladder

REFERRING VET

Dr. Gabriel Ferrer,
DVM

Liver images are inconspicuous. Echotexture, size and vasculature appear regular. Evidence of nodular or focal changes are not visible.

Gallbladder is highly filled with corpuscular bile and a large amount of fast sedimenting, hyperechoic sludge. Signs of a florid process or cholestasis are missing.

INVOICE

13335

Gastrointestinal

DATE

9/28/21



PATIENT	The stomach, the small intestine and colon present intact wall layers being normal in width and echogenicity. Adjacent mesentery and fat tissue are of normal appearance. No overt evidence of ileus and again, no signs of a florid or neoplastic process. Mesenteric lymph nodes are considered to normal.
Can Blacky Unidad Canina Policia de PR	
SPECIES	Pancreas
Canine	All pancreatic parts displayed show isoechoic echogenicity to the surrounding omental fat. Signs of inflammatory changes or focal lesions are missing.
BREED	Free Abdomen
Belgian Shepherd	No peritoneal or retroperitoneal effusion. Abdominal fat and great vessels show no pathological findings.
SEX	Ultrasonographic findings
Neutered Male	<ul style="list-style-type: none"> • Significant and diffuse thickening of the urinary bladder wall • Moderate splenomegaly with an irregular, patchy echotexture and hypoechoic nodular lesions
AGE	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
7 years	Ultrasonographic findings of the bladder do reflect the reported hematuria. The significant and even thickening of the wall could represent chronic cystitis. Chronic increased resistance due to obstructive disease (urethra?) is possible but would not explain hematuria. Neoplasia is not suspected. Infiltrative disease is rare and does not match with the reported duration. Uroliths are not detected. Cystocentesis for urine culture/cytology as well as a follow-up ultrasound in 8 weeks after initial/empiric therapy could be the next diagnostic steps.
INTERPRETED BY	
Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging	
HOSPITAL NAME	Splenomegaly is somewhat breed-expected and unspecific. The patchy appearance and the nodular lesions are commonly seen with extramedullary hematopoiesis and/or benign lymphoid hyperplasia. Neoplastic infiltration and splenitis are further differentials. Final assessment is a matter of the temporary course (follow-up in 6 weeks?) and/or ultrasound guided FNA.
Paseos VC	
REFERRING VET	TECHNICAL COMMENTS
Dr. Gabriel Ferrer, DVM	Nice performed study for a panting dog!
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PATIENT

Can Blacky Unidad
Canina Policia de PR

SPECIES

Canine

BREED

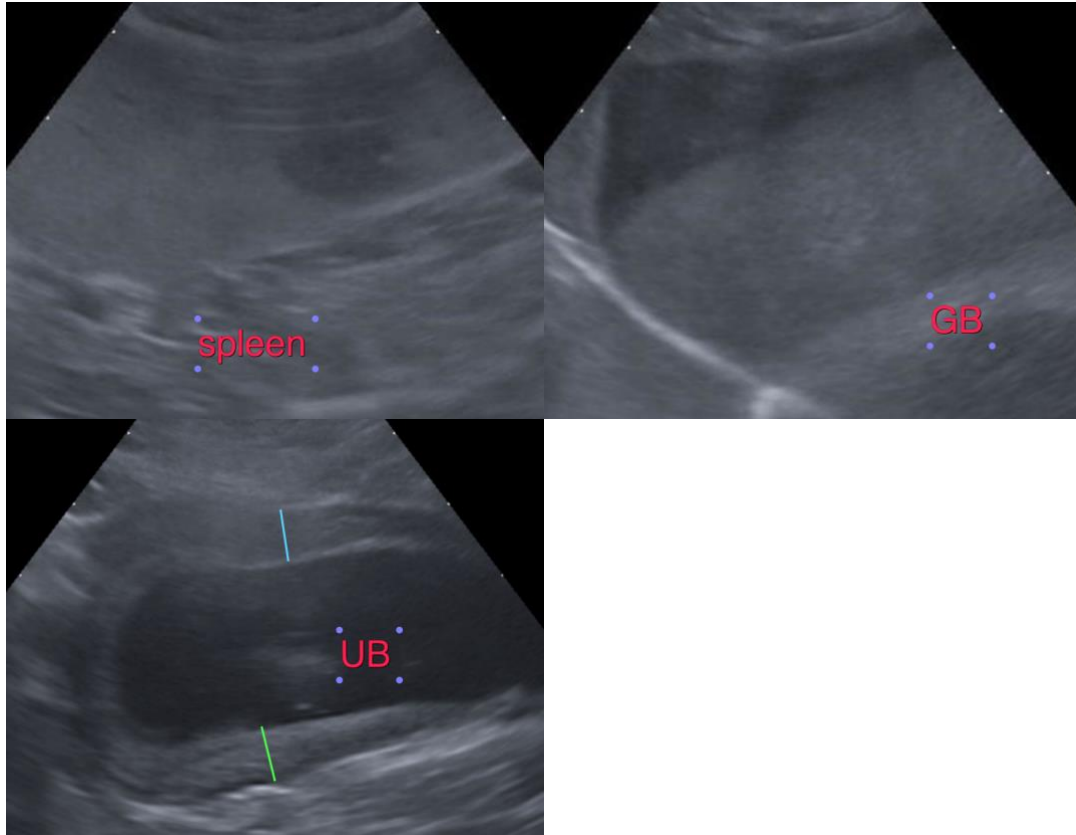
Belgian Shepherd

SEX

Neutered Male

AGE

7 years



INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

HOSPITAL NAME

Paseos VC

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com

REFERRING VET

Dr. Gabriel Ferrer,
DVM

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