



## PATIENT

Luna Romero

## SPECIES

Canine

## BREED

Dachshund

## SEX

Spayed female

## AGE

7 years

## WEIGHT

14.2 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Jazmin Munoz

## HOSPITAL NAME

Oakridge VC

## REFERRING VET

Dr. Munoz

## INVOICE

71152

## DATE

2/2/26

## PRESENTING CLINICAL SIGNS

- Follow up from previous AUS as not bladder was not distended.
- Hx of hematuria for a few weeks with no LUTs. Unresponsive to course of antibiotics. Recent UA + UMIC revealed USG 1.046, 1+ urine protein, 3+ blood, UMIC neg. She was diagnosed with Mammary carcinoma, comedocarcinoma subtype, grade III in Nov 2025. Trads previously clear. Surgery performed to remove.
- Recent UA + UMIC revealed USG 1.046, 1+ urine protein, 3+ blood, UMIC neg.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder is normally distended. The bladder wall is thin, smooth, and regular, measuring 0.74–0.86 mm dorsally and 0.70–0.81 mm ventrally, with preserved wall layering. Mild gain-related reverberation artifact is noted. The urine is predominantly anechoic with only rare suspended echoes. Normal appearance of the bladder neck and proximal urethra. There are no calculi, and no evidence of inflammatory or neoplastic changes.

## ULTRASONOGRAPHIC FINDINGS

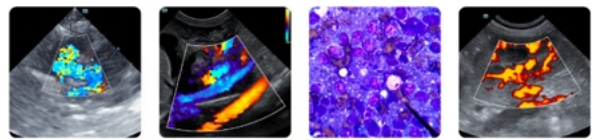
This follow-up abdominal ultrasound was performed to reassess the urinary bladder after a prior study limited by inadequate bladder distension. On the current examination, the urinary bladder is adequately distended, allowing reliable evaluation.

Overall, no structural abnormalities of the urinary bladder are identified on this adequately distended examination. The prior sonographic impression of bladder wall abnormality is most consistent with pseudothickening related to underdistension rather than true pathology.

From an ultrasonographic standpoint, no imaging abnormalities are identified to account for the patient's hematuria.

### Recommendations

- Further investigation of hematuria, if clinically warranted, should be guided by clinical judgment and laboratory evaluation.



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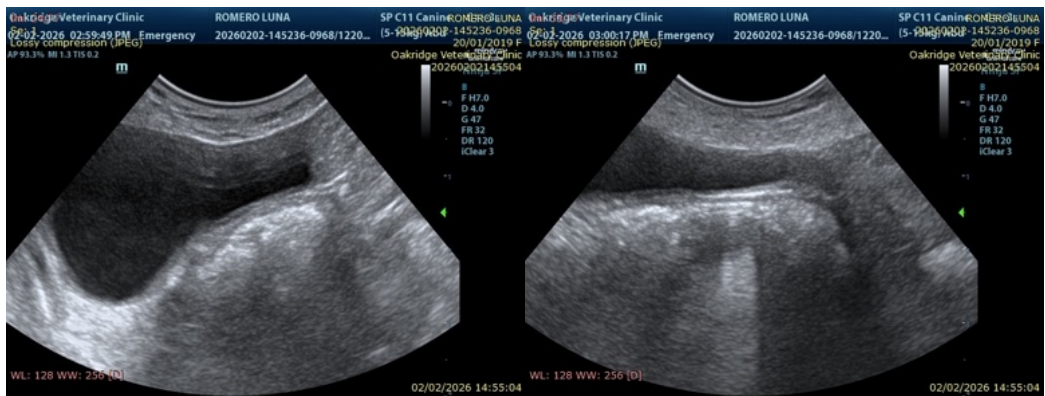
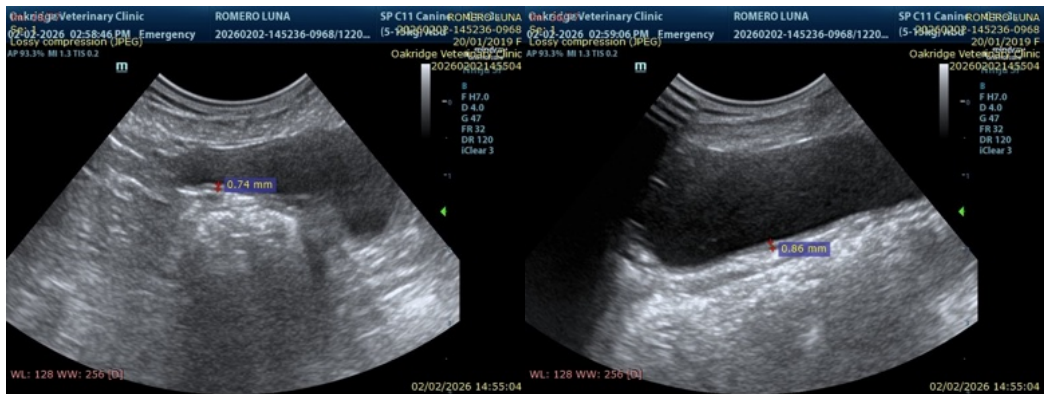
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.  
MV Esp Ultrasound in Domestic and Wild Animals  
[info@SonoPath.com](mailto:info@SonoPath.com)