



PATIENT

Peaches Guertin

SPECIES

Canine

BREED

Australian Mix

SEX

FS

AGE

12

WEIGHT

44 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Julie Paulsen

HOSPITAL NAME

Monterey Animal
Clinic - FL

REFERRING VET

Dr. Julie Paulsen

INVOICE

12066

DATE

6/3/2026

PRESENTING CLINICAL SIGNS

Pt presented in April with hematuria and bacteriuria. Many small uroliths seen in bladder. Pt was treated with antibiotics and responded. Started Urinary SO diet. Pt has had 2 more utis since. Rad repeated today - fewer and less dense uroliths, but soft tissue density noted in apex of bladder.

ULTRASONOGRAPHIC EXAMINATION OF THE URINARY BLADDER

Urinary Bladder

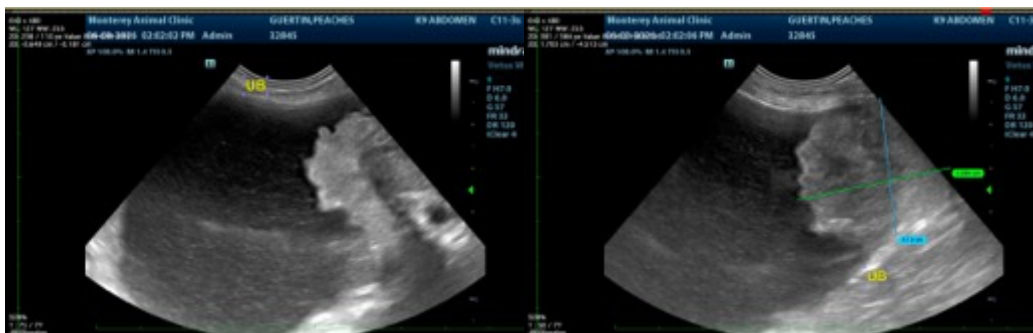
The urinary bladder is adequately to subjectively overdistended with anechoic contents, and a small amount of echogenic suspended debris. There is a solitary heterogenous, irregular echogenic density with pinpoint mineralizations noted throughout it/mass lesion in the trigone area measuring 3.5 cm x 3.1 cm in size. It's difficult to differentiate the mass from the wall of the proximal urethra to determine how far, if any, it extends.

ULTRASONOGRAPHIC FINDINGS

- Urinary bladder mass - Urinary bladder wall changes are most concerning for infiltrative neoplasia such as transitional cell carcinoma vs other. Benign inflammatory disease (cystitis) cannot be ruled out but is considered less likely given the location and appearance of the tissue.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinalysis and urine culture, if indicated based on urinalysis results, are recommended. Submission of urine to look for BRAF gene mutation, which is associated with urinary bladder/prostate cancer, could be considered. Other diagnostic options include traumatic catheterization, fine needle aspirate (with small risk of tumor seeding/trailing) or cystoscopy for further sampling. In the meantime, empirical therapy with a broad-spectrum antibiotic (or ideally an antibiotic based on culture and sensitivity results) as well as an anti-inflammatory (unless otherwise contraindicated based on patient co-morbidities) may begin to help alleviate clinical signs.





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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.

Beth Johnson, DVM, DACVIM
info@sonopath.com