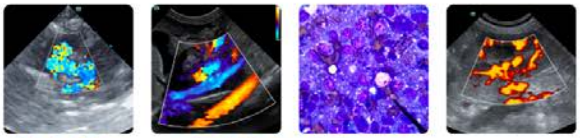

SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Teddy Maissoneuve

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

12 Years

WEIGHT

16 kg

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Westoak Animal Hospital

REFERRING VET

Dr. Kohlmaier

INVOICE

72289

DATE

1/20/26

PRESENTING CLINICAL SIGNS

Blood in urine.

We used our in hospital scanner and believe we saw something but aren't sure.

Primary Question to Be Answered in This Exam - Is there is a mass?

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder lumen contains a large, roughly ovoid, echogenic, non-shadowing mass effect measuring at least 4.8 cm x 2.6 cm. It is not definitively attached to any specific surface of the bladder wall, and the bladder wall generally appears to have a normal thickness with normal wall layering. Color flow does show potential blood flow within the mass effect. However, movement artifact cannot be ruled out due to continuous motion throughout the cine loop.

The kidneys have a smooth capsule and with mild hazing of corticomedullary definition. No evidence of pelvic dilation was present. Hyperechoic, shadowing foci present in left renal parenchyma and calyces consistent with nephrocalcinosis. Left kidney measures 5.56 cm. Right kidney measures 5.43 cm.

Adrenal Glands

The right adrenal gland is visualized and measured on still images only. Resolution is inadequate to assess glandular detail or confirm measurement. Right measures 1.45 cm in length x 0.56 cm at the caudal pole and 1.16 cm at the cranial pole.

The left adrenal gland is visualized on still images only. It appeasr to have normal shape, size, position and echogenicity for this breed and age though this could not be confirmed on cine loops. Left measures 1.77 cm in length x 0.60 cm at the caudal pole and 0.55 cm at the cranial pole.

Spleen

The spleen was normal with age appropriate homogeneous parenchyma and a smooth capsule with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

Liver

The liver is subjectively normal in size with normal contours and structure. There is age appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion.

Gall bladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate. No masses or focal lesions were observed.

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall

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layering maintaining the typical 1:3 muscularis:mucosa layer ratio. There were no focal lesions consistent with obstruction or a mass effect observed.

Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The area of the pancreas was isoechoic to surrounding tissue with no overt inflammation. Pancreatic tissue was not distinctly visualized which is common.

Free Abdomen

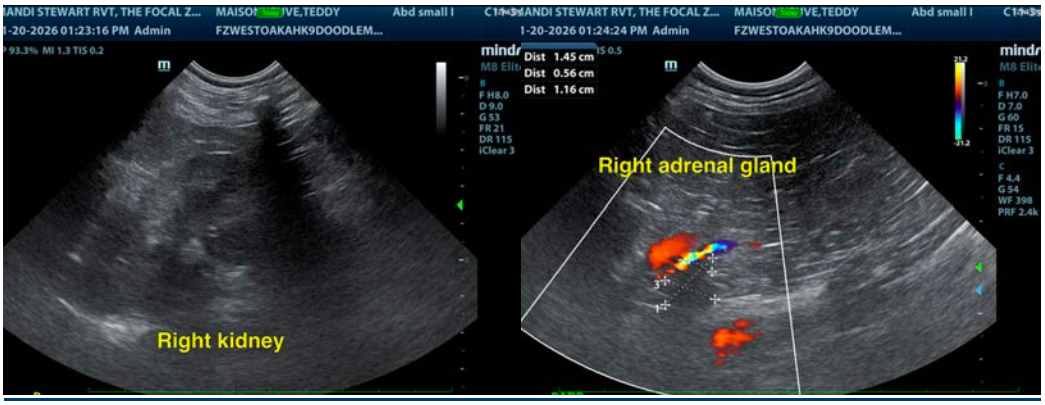
No clinically significant lymphadenopathy or abnormalities noted. No free fluid noted.

ULTRASONOGRAPHIC FINDINGS

- Large urinary bladder mass effect – blood clot versus true mass.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The large ovoid structure within the urinary bladder is concerning for a urinary bladder mass, though may also represent a large blood clot. Coagulation testing is recommended as well as full bloodwork to assess coagulation status. Urine CADET BRAF test is recommended to screen for transitional cell carcinoma, which is the most common urinary bladder neoplasm. Serial monitoring with ultrasound and measurement of the mass effect is recommended, as a blood clot would be expected to gradually get smaller in size.



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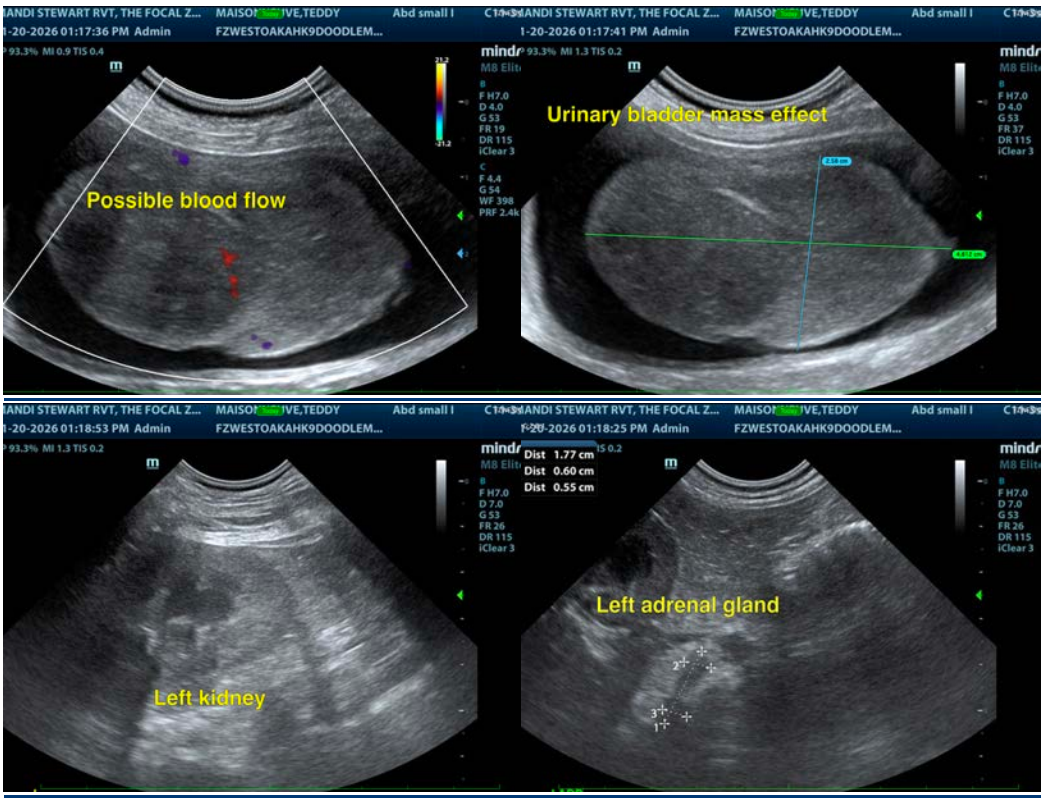

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC

info@SonoPath.com