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DATE

2/10/23

PATIENT

Sky Bayer

SPECIES

Canine

BREED

Boxer

SEX

Spayed Female

AGE

3/5/22

WEIGHT

46.3 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Hickory Vet Hospital

REFERRING VET

Dr. McNesby

INVOICE

45074

PRESENTING CLINICAL SIGNS

June 2022 - Patient presented for ingestion of small amount of grapes. No abnormalities on bloodwork, no treatment. Sept 2022 - Patient presented for urinating in the crate for 1 week, possibly blood visible at end of stream. Treated with Amoxicillin. Sept 2022 - Clinically improved on recheck. Ultrasound for cysto showed thickened bladder wall and particulate matter in urinary bladder. U/A showed protein, red blood cells, white blood cells, rods. Urine c/s - Proteus. Treated with Cefpodoxime x 14 days. November 2022 - Spay. December 2022 - 2 weeks after spay, owner called to report clear discharge (mucoid) from vulva. December 2022 - 2 weeks later - discharge persisting, blood coming from vulva, increased frequency of urination, increased urgency (accidents in house). Treated with Enrofloxacin x 14 days (7 mg / kg q 24 hours). Owner reports symptoms improved slightly, but recurred within 3 days of finishing prescription. January 2023 - Recheck urine - USG 1.015 Blood and rods present in urine. Treated with Clavamox 250mg (12.5mg/kg BID) x 21 days -recheck urine prior to finishing. Feb 2023 - U/A - USG 1.015, no blood, no bacteria, Urine c/s negative growth. Symptoms of urgency/frequency persisting, worse. Serum osmolarity 309.5 mOsm. PE: Grade III - IV/ VI holosystolic murmur with PMI over aortic valve region. Abd non painful, vulvar conformation - vulva small, tucked in, hyperemic skin in perivulvar region.

Current Medications: None listed as current.
Date of Previous IntraPet Ultrasound: No previous.

Sedation: Butorphanol 0.8 mL IV, Dexdomitor 0.2 mL IV

Stat Report: Not requested.
Imaging Performed By: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and trigone presented normal thicknesses and normal tone. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.7 cm. The right kidney measured 7.0 cm.

The left ureter was dilated up to 0.25 cm and appears to enter into the dorsal aspect of the cystourethral junction wall and continue into the pelvic urethra, consistent with ectopic ureter.

Right ureteral jet appeared to be present without issue.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 2.59 cm x 0.57 cm at the caudal pole and 0.63 cm at the cranial pole. The right adrenal gland measured 2.68 cm x 0.71 cm at the cranial pole and 0.47 cm at the caudal pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen was folded upon itself caudally. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

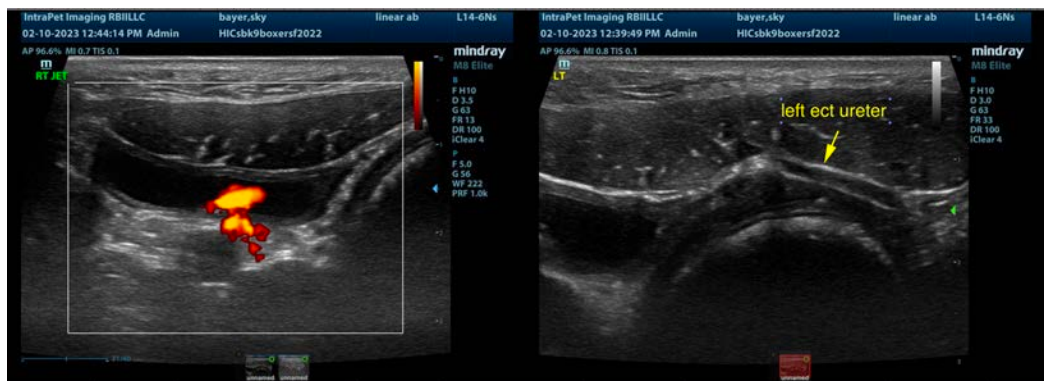
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

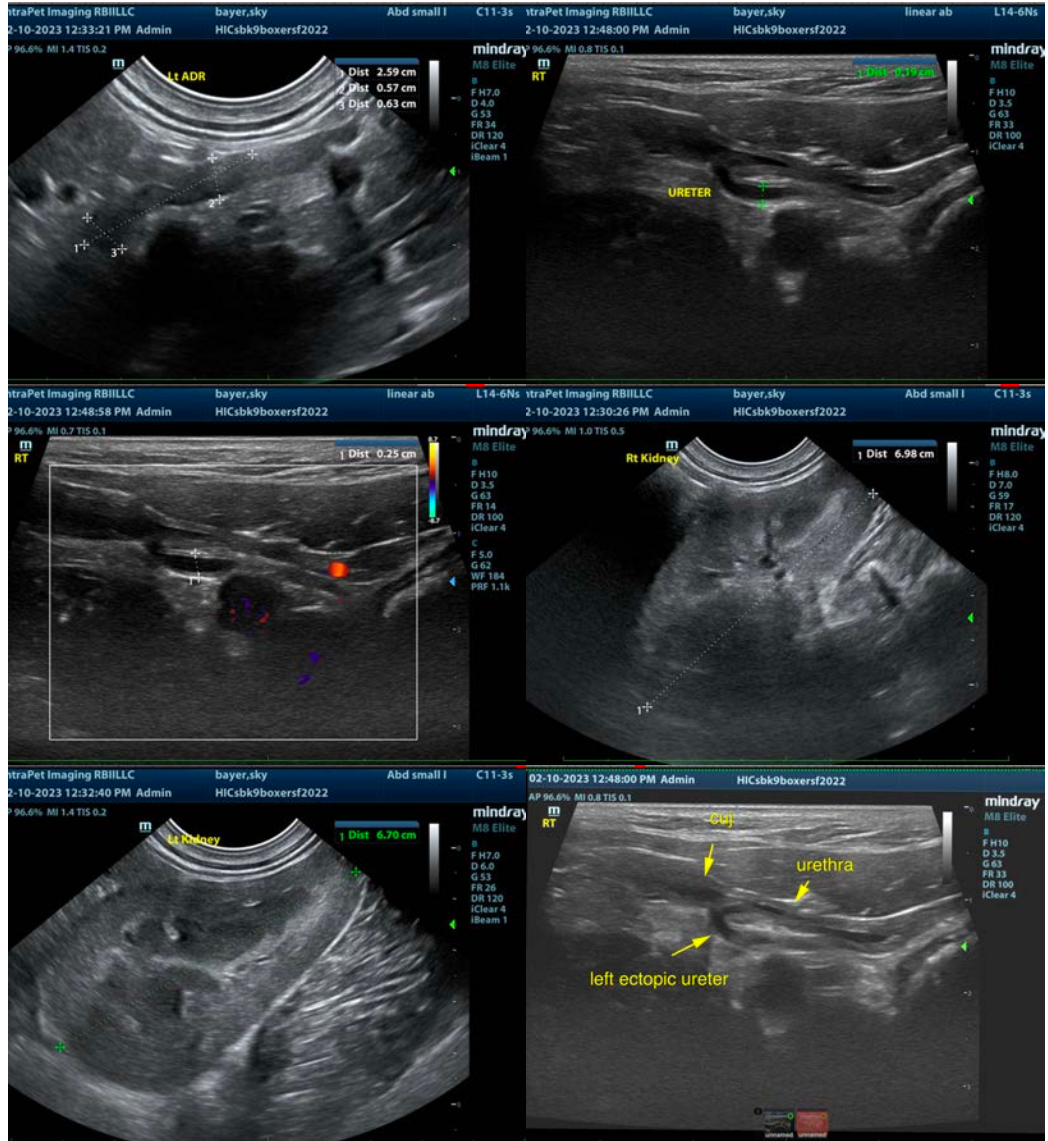
ULTRASONOGRAPHIC FINDINGS

- Left ectopic ureter
- Folded spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Surgical intervention recommended. CT with contrast could be considered for further definition and surgical planning.





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.

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