



DATE PRESENTING CLINICAL SIGNS

4/20/26

Patient History: One day history of straining to urinate and yellow vulvar discharge. PE: ABD: Tense on abdominal palpation painful and distended caudal abdomen. UG: Thickening at the dorsal aspect vulva

PATIENT

Marley Weimer

Current Medications: Methadone on presentation, Dexdom CRI due to anxious temperament.

Labwork Results: Labwork not attached, reported as; 4/20/26 CBC:WBC: 16.91 (H normal), Neuts: 13.82 (H) Chem 12/lytes- Globulin: 3.8 (H), Chol: 337 (H), K: 3.5 (L). Urinalysis (collected via urinary catheter): USG: 1.014, 50+ WBCs/field, few cellular casts, bacteria present. Urine culture - pending

SPECIES

Canine

Radiology report (prior to u cath placement) There is 1 large gas bubble and a couple of small gas bubbles visible in the urinary bladder. There is no evidence of mineral radiopaque uroliths. The retroperitoneum is unremarkable. The renal silhouettes are not clearly visualized. Ultrasound of the urinary tract is recommended in this patient to fully evaluate the bladder, the bladder trigone and the proximal urethra. Both kidneys should also be assessed.

BREED

Dalmatian

Date of Previous IntraPet Ultrasound: No previous.

Sedation: IV Propofol required to complete full diagnostic ultrasound.

SEX

Intact Female

Stat Report: STAT requested.

Imaging Performed by: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

10/9/18

Urinary System

The **urinary bladder** revealed concentric wall thickening with sand, and mural hypertrophy up to 1.0 cm at minimal repletion. Foley catheter was in proper position.

WEIGHT

22.8 kg

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex. Trace pyelectasia noted in the left kidney. The left kidney measured 6.2 cm. The right kidney measured 6.56 cm with slight pyelectasia at 0.50 cm.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

HOSPITAL NAME

Mason Dixon Animal
Emergency Hospital

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. Left measured 0.65 cm. Right measured 2.95 cm x 0.86 cm at the cranial pole and 0.87 cm at the caudal pole.

REFERRING VET

Dr. Yolles

Spleen

The **spleen** was folded upon itself. It presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. 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.

INVOICE

74623

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and

common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

The **stomach** was overdistended with chyme and ingesta. The pylorus was patent, consistent with ileus.

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.

Other

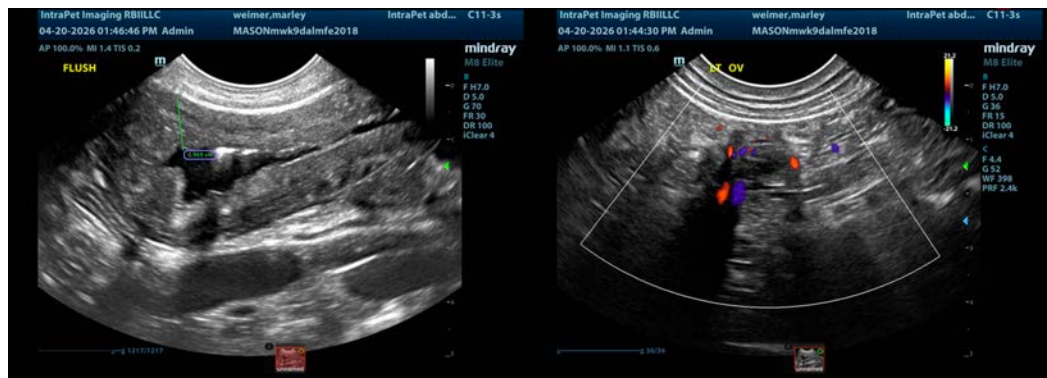
The uterus and ovaries were uniform, no evident pathology. Uterine horns were uniform. Uterus measured 0.65 cm. Left ovary measured 1.66 cm. Right ovary measured 1.2 cm.

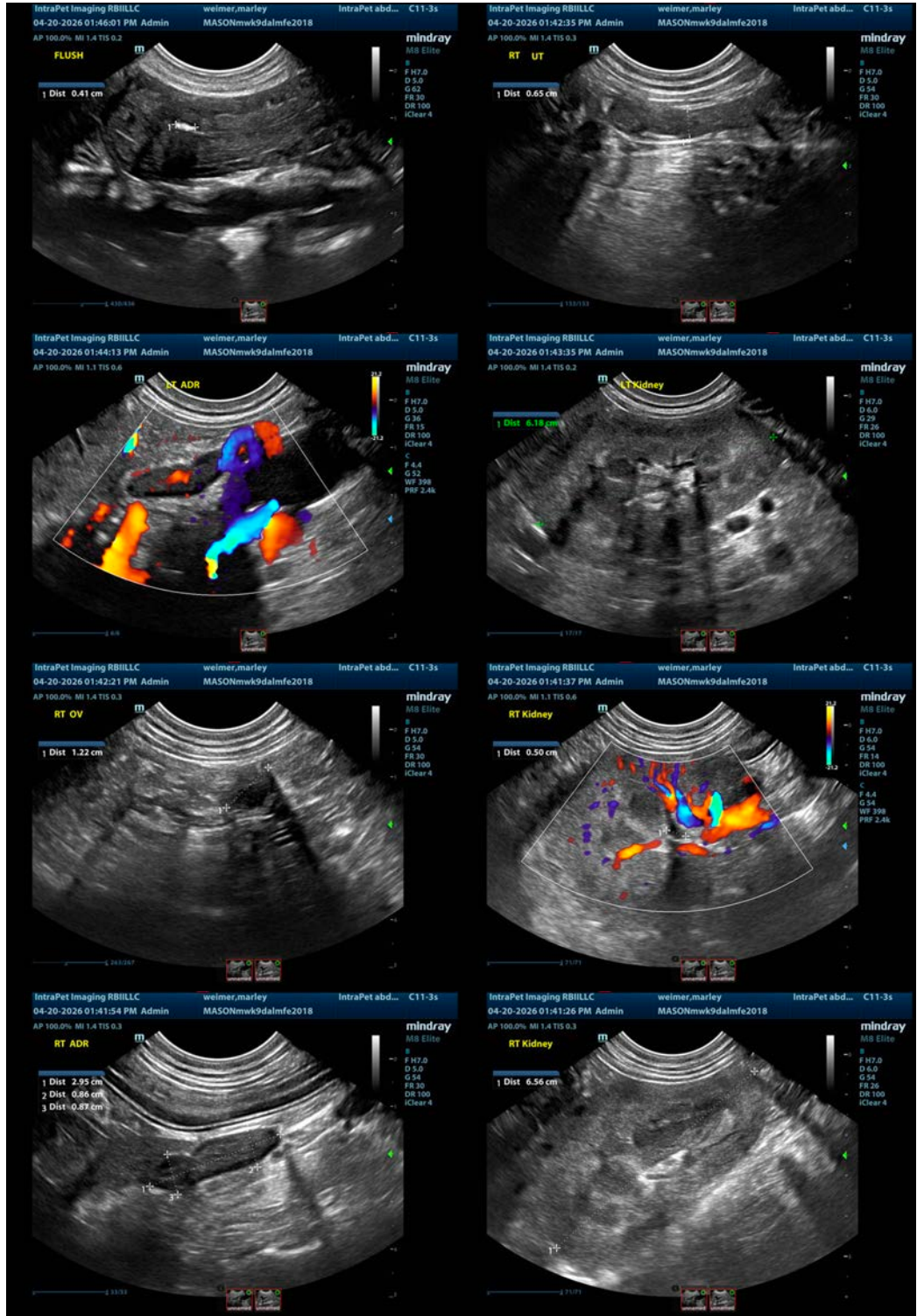
ULTRASONOGRAPHIC FINDINGS

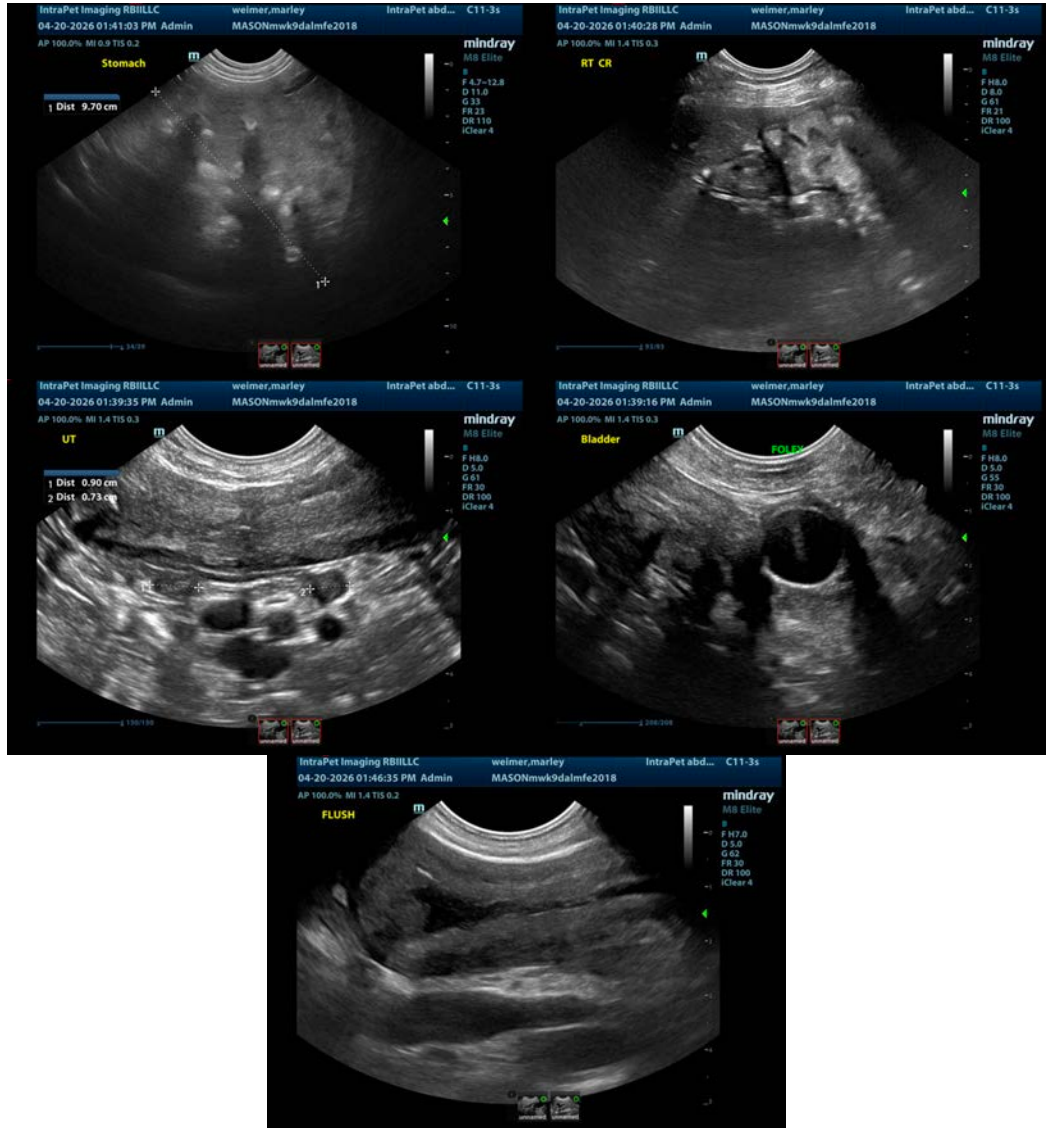
- Chronic cystitis pattern with sand accumulation.
- Potential pyelonephritis.
- Age related hepatic changes.
- Gastric ileus.
- Folded spleen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full urinary workup, IV fluid support, antibiotic therapy all indicated. I cannot completely rule out bladder neoplasia, though not suspected. Cytospin of a free catch urine sample to assess for carcinoma cells indicated as well as eventual urine culture and sensitivity and possible BRAF testing. If the patient was NPO at the time of the sonogram, foreign matter is possible. However, the pattern is most consistent with gastric ileus.







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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