

**DATE**

4/27/22

PRESENTING CLINICAL SIGNS

Hx of urinary leakage since the o have had puppy 17 weeks old. Has been treated for UTI when urine rechecked clear of infection but leaking still occurring. UA and culture pending to make sure 100% clear.

PATIENT

Stitch Burke

Current Medications: None.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: 0.06cc telazol IV.
Stat Report: Not requested.
USG 1.034, minor red cells.

SPECIES

Canine

BREED

French Bulldog

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SEX**

Intact Female

Urinary System

The **urinary bladder** was imaged in its entirety, including up to 3.0 cm into the pelvic urethra. A 2.0 mm wide, anechoic tubular structure was present ventral to the cystourethral junction. It could not be completely followed into the pelvic urethra. However, this is suspicious for ectopic ureter, yet exceedingly small. Recommend CT with contrast or IVP to confirm suspicion.

AGE

12/22/21

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 right kidney measured 3.84 cm. The left kidney measured 4.08 cm.

WEIGHT

13.5 Pounds

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 right adrenal gland measured 1.34 cm x 0.61 cm at the caudal pole and 0.60 cm at the cranial pole. The left adrenal gland measured 1.42 cm x 0.51 cm at the caudal pole and 0.48 cm at the cranial pole.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUS**Spleen**

The **spleen** 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.

IMAGING PERFORMED BY

Rachel Brilhart RDMS

HOSPITAL NAME

Northwind AH

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.

REFERRING VET

Dr. Repsher

INVOICE

37243

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.

Other

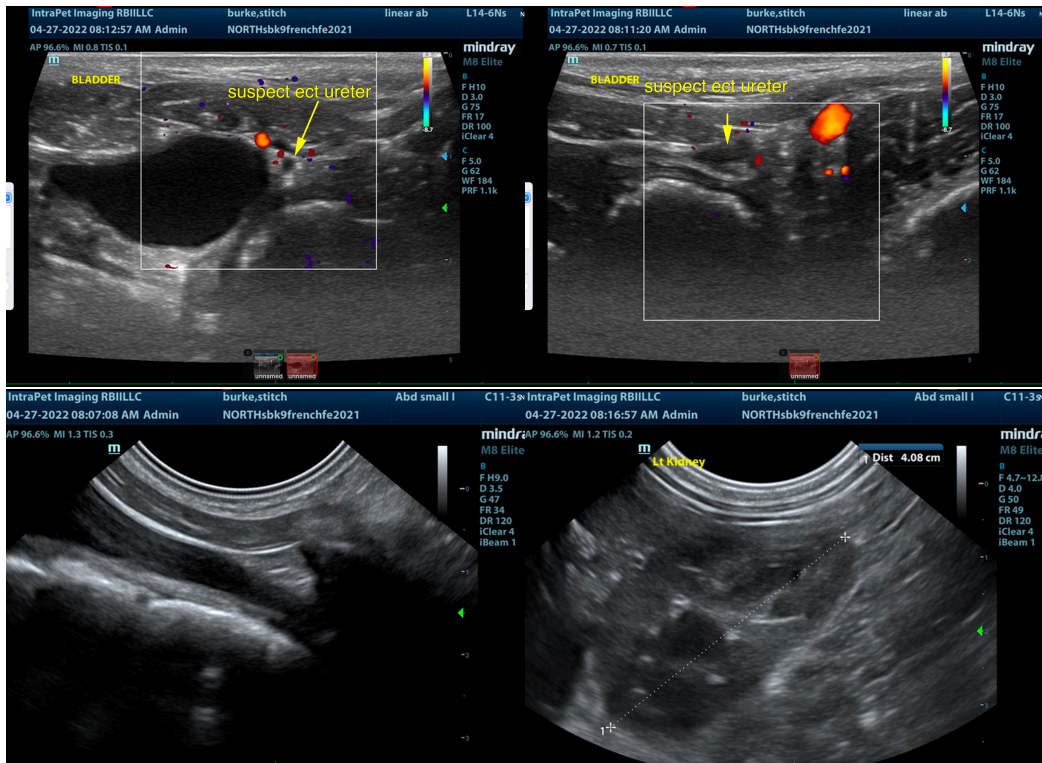
The uterus was uniform, no evident pathology, measuring 0.93 cm. The left ovary was uniform at 0.97 cm. The right ovary measured 0.95 cm.

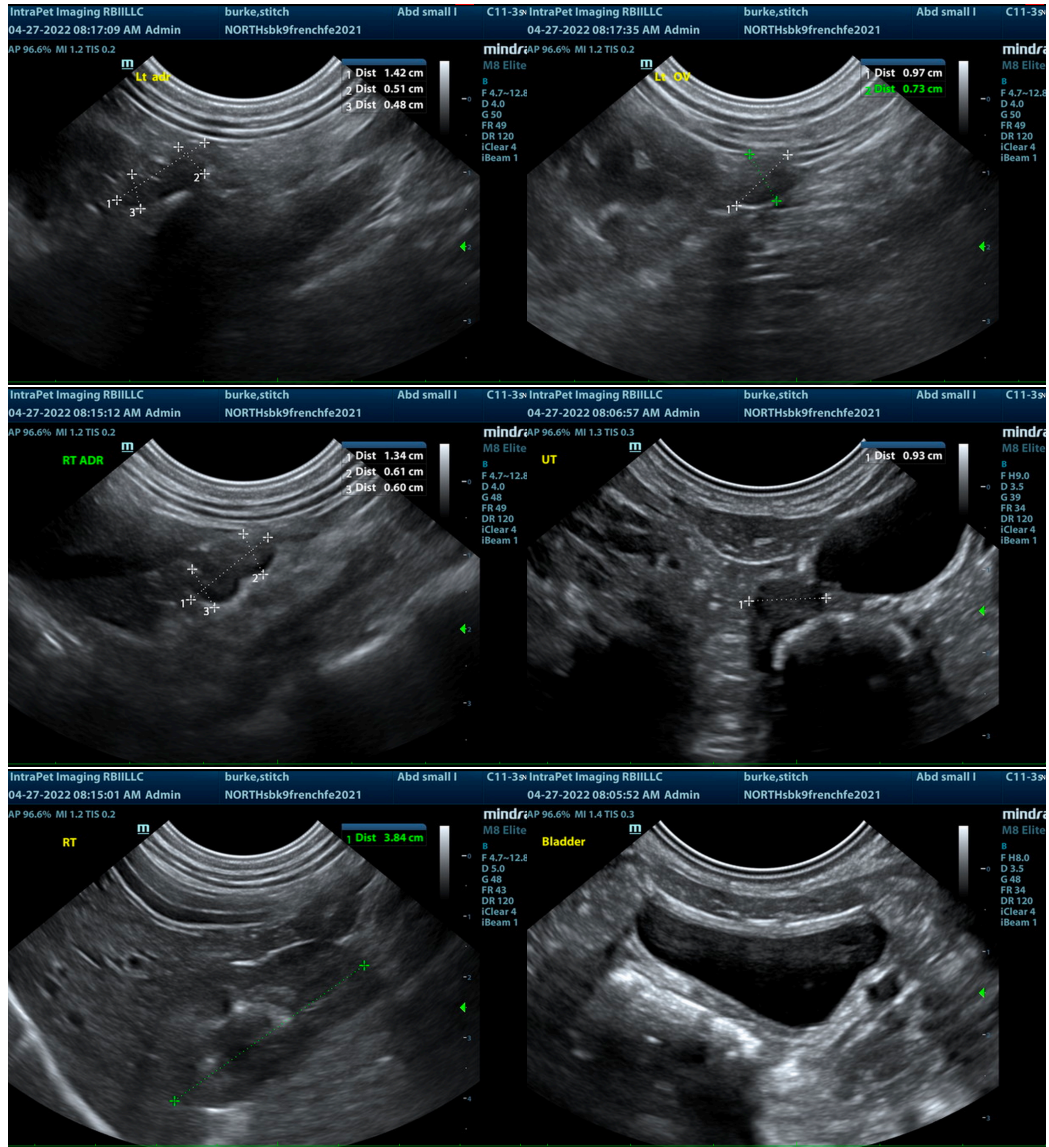
ULTRASONOGRAPHIC FINDINGS

- Suspicion of ectopic ureter in the ventral aspect of the cystourethral junction and likely entering into the urethra, yet could not be confirmed.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT with contrast recommended for confirmation and surgical planning. The structure was color flow negative. It does not appear to be a blood vessel.





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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com