



PATIENT

Duke Baehr

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Neutered male

AGE

2 years

WEIGHT

7.95 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Garner

HOSPITAL NAME

Wilvet Salem

REFERRING VET

Dr. Gardner

INVOICE

30378

DATE

5/14/22

PRESENTING CLINICAL SIGNS

The other night taking a long time to urinate. The past 1.5 weeks intermittent vomiting (not uncommon for him, sensitive to food and another person in house will feed him) taking a long time to pass urine went to vet. didnt produce anything did Xrays - no stones Urine sample- crystals then started crying - gave pain meds abdomen was swelling, took an Xrays, tried to insert an IVC, some some stuff out and he urinated before Placed 5fr RR easily with no resistane. 8fr RR was too large for P. Removed 35mL of dark urine with small white debris present. AFAST: Debris in bladder, no obvious stones seen.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. A minor amount of sand was noted in the pelvic urethra as well. Approximately 3.0 cm of sand accumulation was noted as well as suspended debris and attached mucous. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

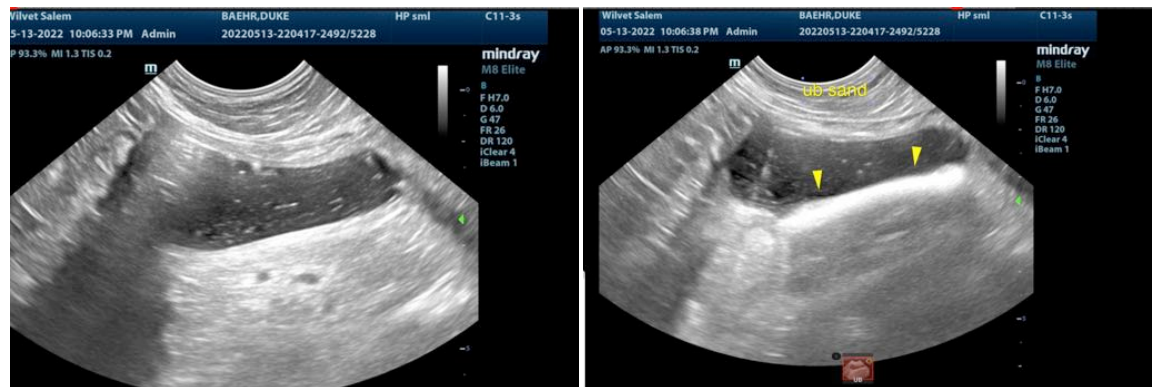
The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The kidneys both measured 3.0 cm.

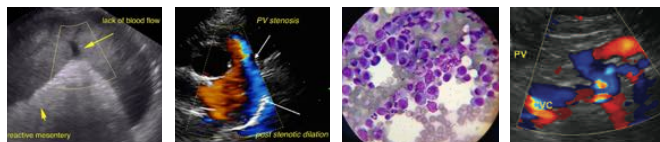
ULTRASONOGRAPHIC FINDINGS

Bladder sand and debris as well as minor urethral sand.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend full abdominal sonogram with assessment for portosystemic shunting given the age of the patient and bladder sand especially if biurate crystals are present to assess if portosystemic shunt may be the underlying issue. Otherwise, assessment for UTI and eventual cystotomy with normal and retrograde flushing, sand analysis and culture are indicated.





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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.

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