



**PATIENT PRESENTING CLINICAL SIGNS**

**Mochi Lee**  
**SPECIES** Canine  
Reason for Visit: URINARY ISSUE History: P HAS BEEN LEAKING URINE GOING ON SEVERAL MONTHS GETTING MORE FREQUENT AND LARGER AMOUNTS. O STATES P NORMALLY URINATES A LITTLE WHEN GETS EXCITED BUT O FEELS P NOT AWARE OF URINATING WILL HAPPEN WHEREVER SHE HAS BEEN LAYING/LEEPING. O NOTICING BLOOD TINGED URINE SPOTS AFTER P HAS URINATED O STATES HAS HAPPENED BEFORE BUT GOES AWAY. NO ABNORMAL ODOR. NO OTHER CONCERNS.

**BREED** Corgi  
Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no debris AU; No cough on tracheal palpation. Oral Cavity: Mild dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: Severely hooded vulva, dark brown colored fur surrounding vulva Musculoskeletal: Ambulatory x4, no lameness noted. No pain on palpation of limbs. BCS 7/9 Neurological: Appropriate Diagnostic Testing Needed:

**SEX** Spayed Female  
Urinalysis, urine culture, abdominal radiographs, abdominal ultrasound Declined Diagnostics/Treatments: n/a Findings: -Urinalysis: USG 1.029, blood 50 Ery/uL

**AGE ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

5 Years 7 Months

**Urinary System**

**WEIGHT**

42 Pounds

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. 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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

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 5.2 cm. The right kidney measured 4.2 cm.

**IMAGING PERFORMED BY**

Michaleen

**Adrenal Glands**

The **adrenal glands** were not visualized.

**HOSPITAL NAME**

DPC Vet Hospital

**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.

**REFERRING VET**

Dr. Orcutt

**Liver**

**INVOICE**

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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.

**DATE**

7/16/22



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**Gastrointestinal**

A minor amount of non-shadowing, non-obstructive ingesta was noted in the **stomach**. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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**

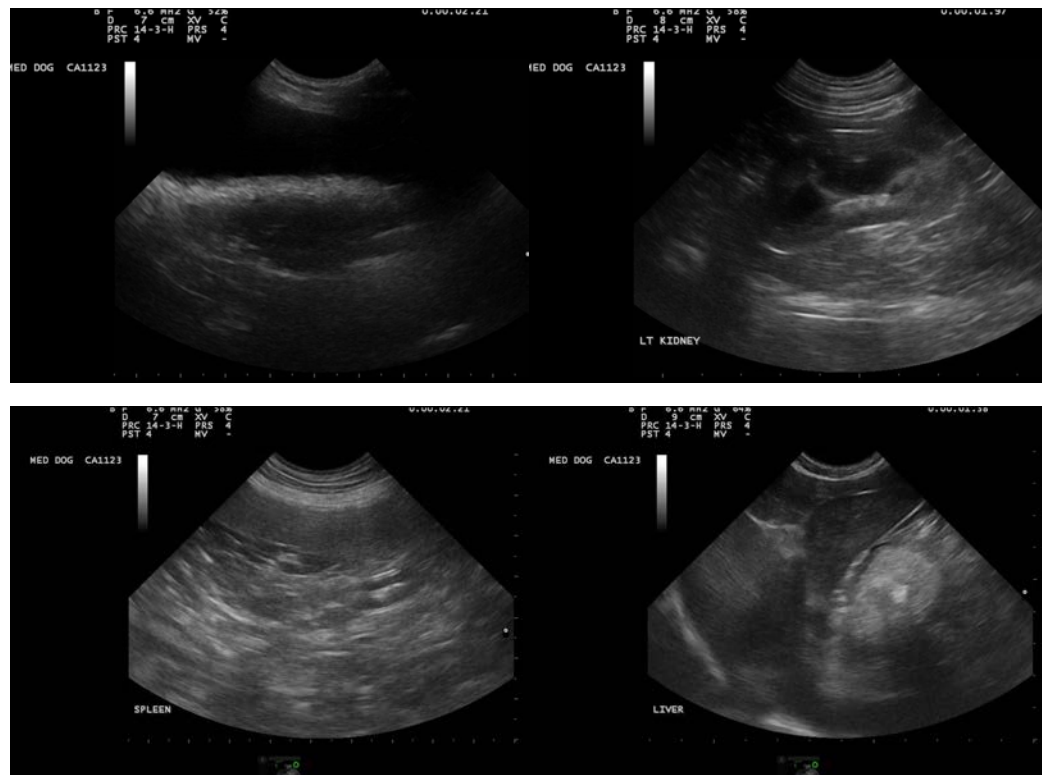
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**PRIMARY FINDINGS**

- Structurally unremarkable abdomen

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No structural evidence of disease related to the clinical history. Examination of the vaginal vestibule warranted for recessed vulva or urine pooling. Antibiotic trial could be considered if not already performed. Primary treatment for incontinence could be considered. If the patient has a lifetime history of these clinical signs, then CT with contrast warranted to rule out ectopic. However, the regions of ectopic ureter were adequately imaged. No obvious ectopy noted.





**PATIENT**

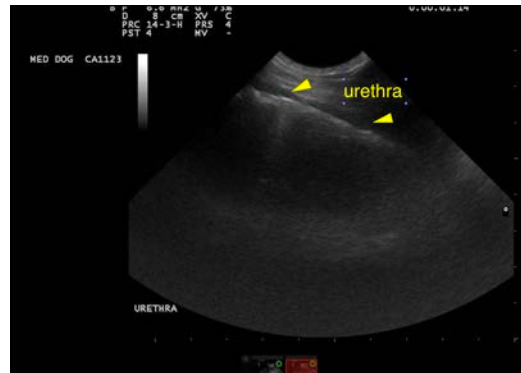
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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