



PATIENT

Sundae Sterwart

SPECIES

Canine

BREED

Jack Russell Terrier mix

SEX

Spayed female

AGE

10 years

WEIGHT

25.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Lincoski

HOSPITAL NAME

University Drive VH

REFERRING VET

Dr. Lincoski

INVOICE

31838

DATE

7/20/22

PRESENTING CLINICAL SIGNS

History: Incidental hematuria noted 6/22, 5/20 when doing routine labwork. Asymptomatic.
Abnormal PE/Chem/CBC/UA Results: Hematuria only finding, moderate, on 3 urinalysis over 2 years, no tick diseases, and normal CBC/CS/T4 as recently as 6/22. Radiographs suspicious ureter mineralization on lateral not noted on VD however. All other urine parameters unremarkable.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and trigone presented normal thicknesses and normal tone. However, the proximal urethra revealed a small calculus that measured 0.15 cm. Bladder sand was noted as well with sand accumulation measuring 2.0 cm. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure. There is loss of corticomedullary definition noted with areas of mineralization. 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 5.58 cm. The left kidney measured 2.7 cm. Blood flow to the kidneys appeared to be adequate on power Doppler assessment.

ULTRASONOGRAPHIC FINDINGS

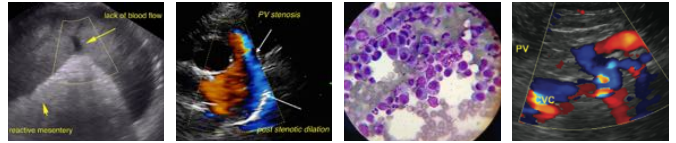
Bladder and urethral sand.

Moderate degenerative renal changes with mineralization.

No obstructive disease noted at this time.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given that this is a female the sand should liberate on diuresis. An alternative protocol would include 24-48 hours of IV fluid push at 1.5 maintenance and recheck of the sonogram after treatment to assess if the urinary bladder has been liberated. Urine culture and sensitivity is warranted if any inflammatory sediment is present. The hematuria is likely owing to passage of calculi from the kidneys to the bladder and/or infection or passage of lower urinary tract sand and calculi.



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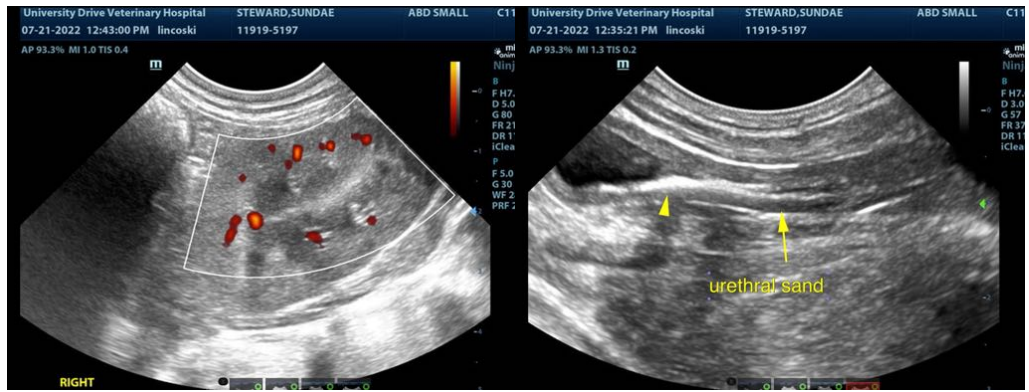
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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