

PATIENT PRESENTING CLINICAL SIGNS

Ellie Ebel History: SONOPATH CC HEMATURIA HX OF 5 UTI AT PREVIOUS VET R/O BLADDER TUMOR

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *Urinary System*

BREED The **urinary bladder** revealed an apical ventral mass that measured 3.0 x 2.5 cm with areas of mineralization. Minor, irregular ventral wall changes were noted at the cystourethral junction. This is potentially owing to tumor spread. The cystourethral junction was unremarkable.

Mix

SEX

Spayed Female 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 6.7 cm. The left kidney measured 6.82 cm.

AGE

9 years

WEIGHT

86.5

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.

INTERPRETED BY

Eric Lindquist, DMV
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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 was noted.

IMAGING PERFORMED BY

Dr. Barnea

HOSPITAL NAME

Tenaflly VC

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

REFERRING VET

Dr. Barnea

INVOICE

91372

Gastrointestinal

DATE

8/19/21

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.



PATIENT

Pancreas

Ellie Ebel

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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Bladder mass, polypoid changes. Suspect carcinoma with a potential of pronounced polypoid hyperplasia with chronic cystitis.

Mix

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

There is a potential for underlying carcinoma. Cystoscopy is recommended with mucosal biopsies and to investigate the pelvic urethra. Cytospin of free catch urine is recommended to assess cellular content. There was no evidence of metastatic disease. Sampling is essential for further definition. The mass may be resectable. However, I am concerned for mural spread into the cystourethral junction and ventral wall avoiding the ability for clean resection. High resolution imaging of the pelvic urethra and cystourethral junction may prove fruitful regarding the extent of the bladder pathology. However, cystoscopy would be ideal in this case.

WEIGHT

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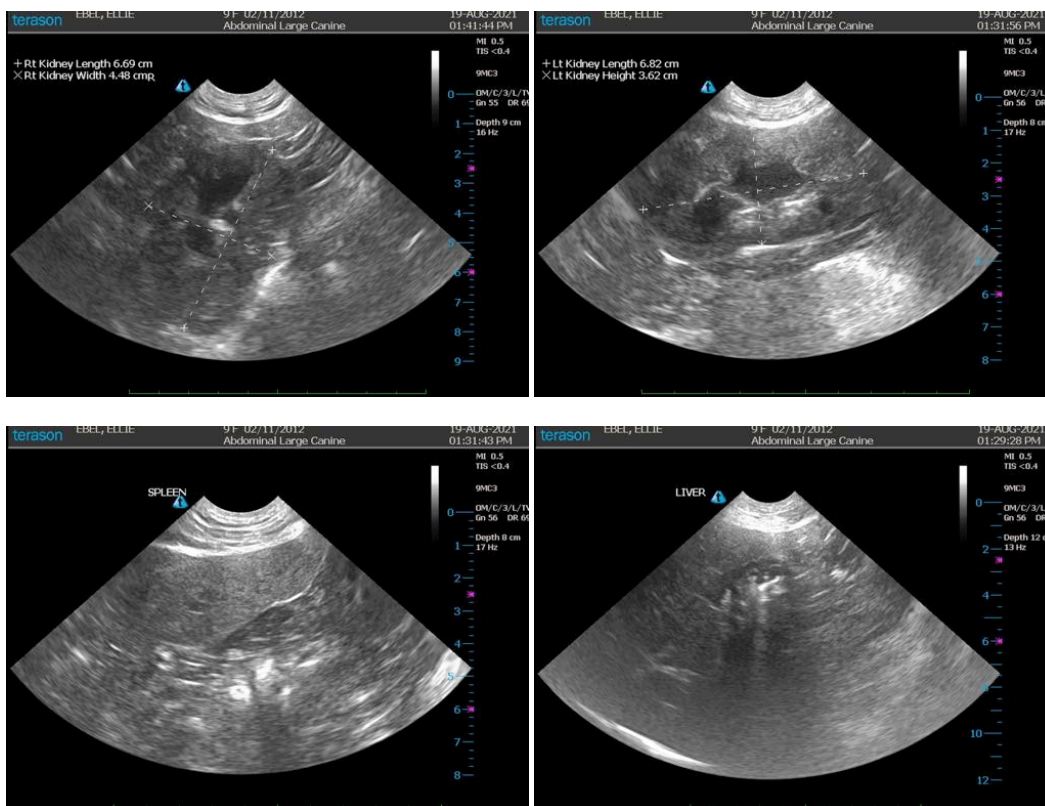
Dr. Barnea

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PATIENT

Ellie Ebel

SPECIES

Canine

BREED

Mix

SEX

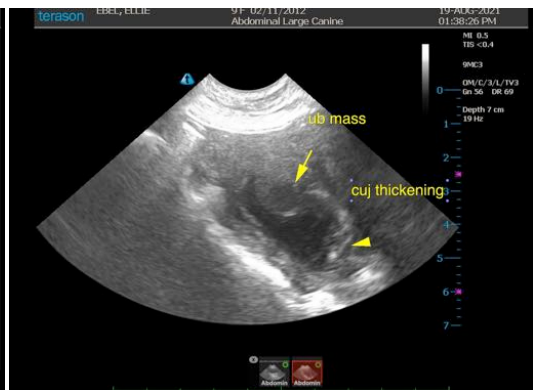
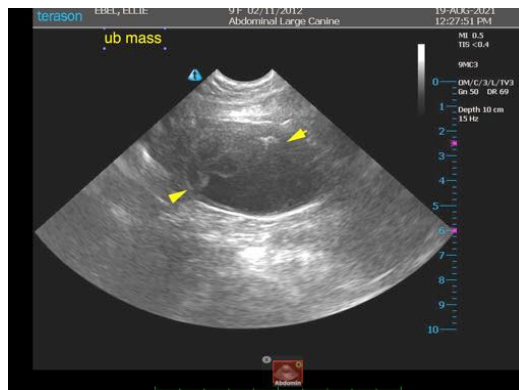
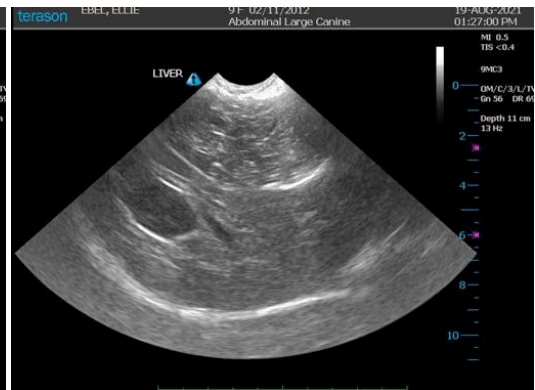
Spayed Female

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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