



**PATIENT**

Hagrid McHart

**SPECIES**

Canine

**BREED**

Boerboel

**SEX**

Neutered Male

**AGE**

2 Years

**WEIGHT**

180 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Laura Couser

**HOSPITAL NAME**

Willamette VH

**REFERRING VET**

Dr. Laura Couser

**INVOICE**

25013

**DATE**

8/28/21

**PRESENTING CLINICAL SIGNS**

Referred for progressive stranguria over past 3 days. No stones seen on survey rads. Positive contrast urethrocytogram performed today after US: no filling defects, stones, or strictures seen in urethra. No stones seen in bladder.

Abnormal PE/Chem/CBC/UA Results: RDVM Diagnostics: CBC, chem10 - all wnl Free catch UA: USG 1.058, pH 8.0, PRO 3+, BLD 3+, BIL 1+, RBC 21-50/hpf, WBC 2-3/hpf, 0-1 struvite crystals/hpf, no bacteria seen. O gave 2 doses of Abx before discontinuing due to no bacteria seen on UA.

**LIMITED ULTRASONOGRAPHIC EXAMINATION**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. A minor amount of suspended debris was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal. The residual prostate was uniform at 2.0 cm. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 measured 5.0 cm each.

**ULTRASONOGRAPHIC FINDINGS**

- Structurally normal urinary tract with minor bladder debris, no evidence of obstructive disease

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Distal urethral pathology possible. However, treatment for occult UTI recommended despite negative bacteria. Underlying urethritis may be an issue.





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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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)