



**PATIENT PRESENTING CLINICAL SIGNS**

**Betty Dekeyser** 4 month FI French Bulldog with congenitally abnormally formed vulva externally. Rather than vertically oriented it is horizontal (almost creating a shelf). The band of tissue (perineum) separating the anus and vulva is also very thin compared to normal. One presumptive UTI. No urinary incontinence. Trying to rule out any other lower urinary tract abnormalities (ie urethrorectal fistula) before considering episiotomy / corrective surgery for vulva.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Normal CBC, Chem Brachycephalic conformation  
Vulva is horizontally oriented rather than vertical (almost creating a shelf). The band of tissue (perineum) separating the anus and vulva is also very thin compared to normal

**BREED**

French Bulldog

**RADIOGRAPH OF THE ABDOMEN**

2x lateral abdomen plain, 5x lateral abdomen with positive retrograde cystography (2 with urinary catheter in bladder), 1x VD abdomen with legs crossed and positive cystogram.

**SEX**

Female Intact

**RADIOGRAPHIC FINDINGS**

The body condition score is 4/9 with smooth alternating layers of fat and soft tissue opacity. Skeletal immaturity compatible with the given age is noted. Multiple congenital anomalies affect the thoracic and coccygeal vertebrae.

**AGE**

5 Months

The abdominal organs are surrounded by a small amount of fat which is physiological for a puppy; diaphragm and abdominal wall are intact.

**INTERPRETED BY**

Heike Rudolf, DVM,  
Dr. med. Vet.,  
DipECVDI DVR

Both renal shadows are superimposed by intestinal loops. A male urinary catheter fills the urethra and terminates at the cranio-dorsal aspect of the urinary bladder. The bladder contains positive contrast, and four wall regions show a slightly irregular filling defect. The bladder is round, and its neck is located intrapelvic. Retrograde filling of the ureters is not obvious.

**HOSPITAL NAME**

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The liver is located within the costal arch.

The stomach contains an increasing amount of air; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of gas.

The sublumbar region appears physiological.

**REFERRING VET**

Dr. Ashley Gold

**RADIOGRAPHIC DIAGNOSIS**

- Round, small bladder
- Intrapelvic bladder neck, compatible with age

**INVOICE**

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Incidental findings:

- Congenital vertebral anomalies
- Aerophagia

**DATE**

5-12-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The bladder location is physiological for an immature female dog prior to her first season. Mucosal irregularities could be the result of insufficient luminal filling or may indicate cystitis. A small, round bladder shadow can be physiological in young animals or may represent hypoplasia



**PATIENT**

Betty Dekeyser

or interstitial cystitis.

A vagino-urtehro-cystogram is recommended to allow assessment of vagina and urethra. This can be carried out with a Foley catheter placed in the vestibulum, the cuff inflated with air and pulled back as far as possible. The tip of the catheter may have to be cut off to avoid blockage of the urethral opening. The vagina should be small in immature bitches but 2ml of contrast (e.g. urografin)/kg can be used; bladder filling can be monitored best fluoroscopically. Ultrasound of the bladder will help identify if wall thickening is present. A congenitally abnormal vagina should only be of significance during parturition and in that case the animal should not be bred from anyway. Thus, depending on the clinical signs, surgical intervention may not be necessary.

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**AGE**

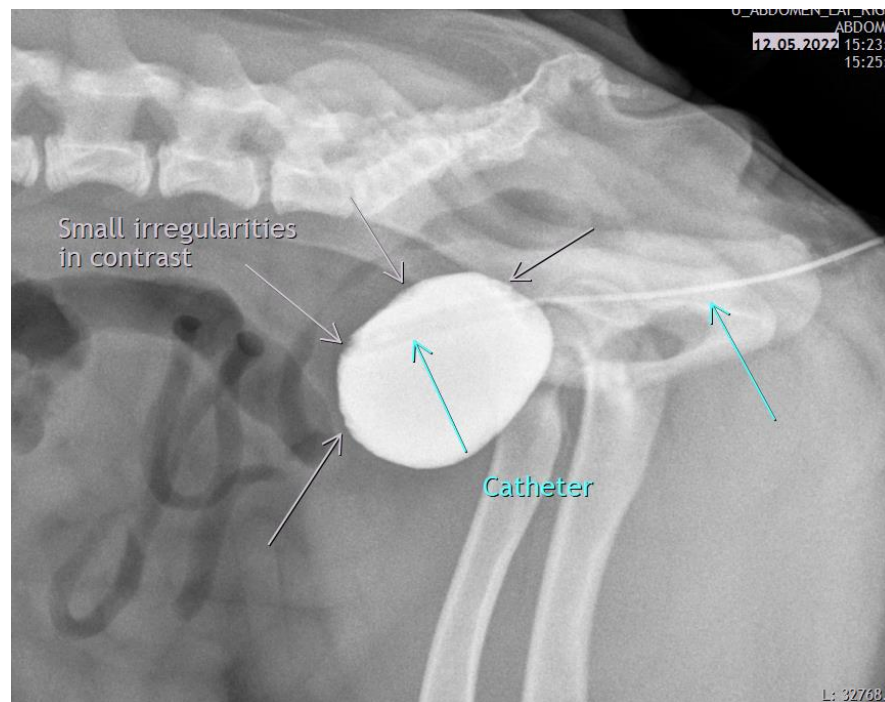
5 Months

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**REFERRING VET**

Dr. Ashley Gold

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.

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
Dr.H.Rudorf@gmail.com

**DATE**

5-12-22