



PATIENT

Otis Nest

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Male Neutered

AGE

4Y

WEIGHT

33.3lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jennifer and Jessica

HOSPITAL NAME

Northvale Veterinary
Clinic

REFERRING VET

Dr. Stefanie Simon

INVOICE

74919

DATE

5-5-26

PRESENTING CLINICAL SIGNS

Hematuria a few months ago otherwise fine. Concerned about uroliths and bladder stones.

Abnormal PE/Chem/CBC/UA Results: 1+ struvite crystalluria, all else WNL.

RADIOGRAPHS OF THE ABDOMEN

R/L lateral and VD, totaling four radiographs provided for interpretation.

RADIOGRAPHIC FINDINGS

The body condition score is 7/9 with a moderate amount of dorsal s.c. fat.

The bony structures appear physiological.

The abdominal organs are surrounded by fat; diaphragm and abdominal wall are intact.

The liver is located within the costal arch, and the caudo-ventral lobe is pointed.

The spleen appears physiological.

The stomach is moderately distended with food. Distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of fecal matter.

The left renal shadow has a physiological size, shape and opacity; the right is obscured by intestinal loops. The bladder shadow is small and located well cranial to the pubic brim.

The sublumbar region appears physiological.

RADIOGRAPHIC DIAGNOSIS

- Physiological study

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I feel that obtaining a urine sample to check for the presence of inflammation and continuing crystalluria should suffice, because no clinical signs are present. Dietary management (restricted protein, phosphorus, and magnesium) should be continued. Assessment of bladder wall thickness and urethral obstruction is possible with a retrograde urethrocytogram. However, abdominal ultrasound is recommended for the assessment of small renal calculi, cystitis tumor and prostatic disease.



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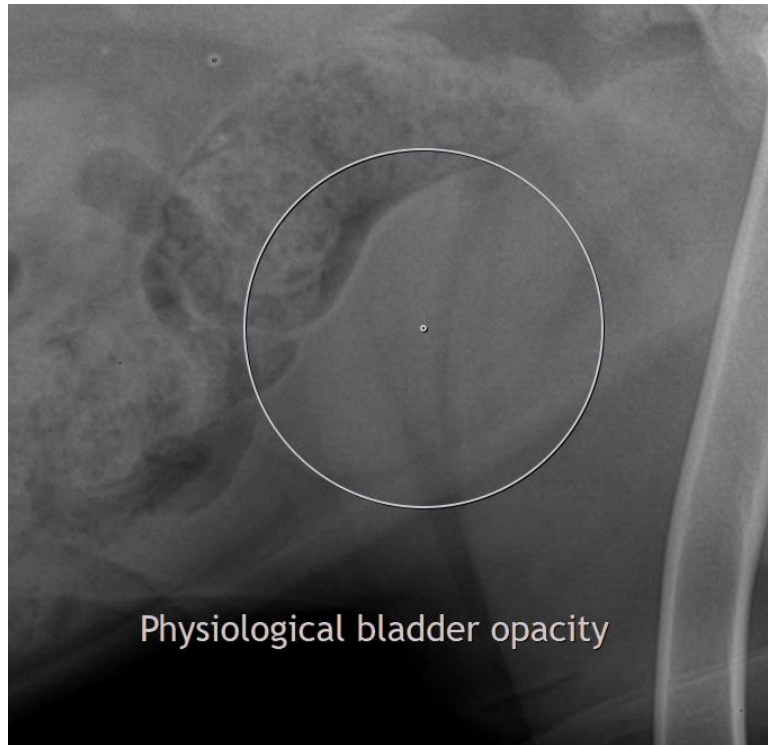
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Physiological bladder opacity

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.

Heike Rudolf, DVM, Dr. med. vet., DipECVDI, DVR
info@sonopath.com