



DATE PRESENTING CLINICAL SIGNS

6/5/26 **Patient History:** Urinary tract infection since May 4th, 2026. Has been on 2 different antibiotics. No obvious stones on x-ray. SpGr 1.026

PATIENT

Willow Nash

Current Medications: 5-4 Amoxi/clav 250mg BID 7 days, 5-18 Enrofloxacin 136mg once a day for 8 days

Labwork Results: Labwork attached, reported as: struvite crystal in urine since beginning of May

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed by: Rachel Brillhart, RDMS.

SPECIES

Canine

BREED

Corgi

Urinary System

The urinary bladder is minimally distended with anechoic urine. The bladder wall appears thickened and irregular, measuring at 1.19 cm, with a large amount of dependent (and some suspended) echogenic mineralized sandy debris. The region of the trigone, ureteral papillae and proximal urethra appear free of any mass lesions or significant calculi.

AGE

3/30/22

The left kidney has a normal shape and size (5.42 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

44 lbs

The right kidney is normal in size (6.31 cm) but irregular in shape (possibly due to previous infarct). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

ULTRASONOGRAPHIC FINDINGS

- Thickened, irregular urinary bladder wall with a large amount of dependent sandy debris – Findings are most consistent with chronic cystitis.

HOSPITAL NAME

Madonna Veterinary
Clinic

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

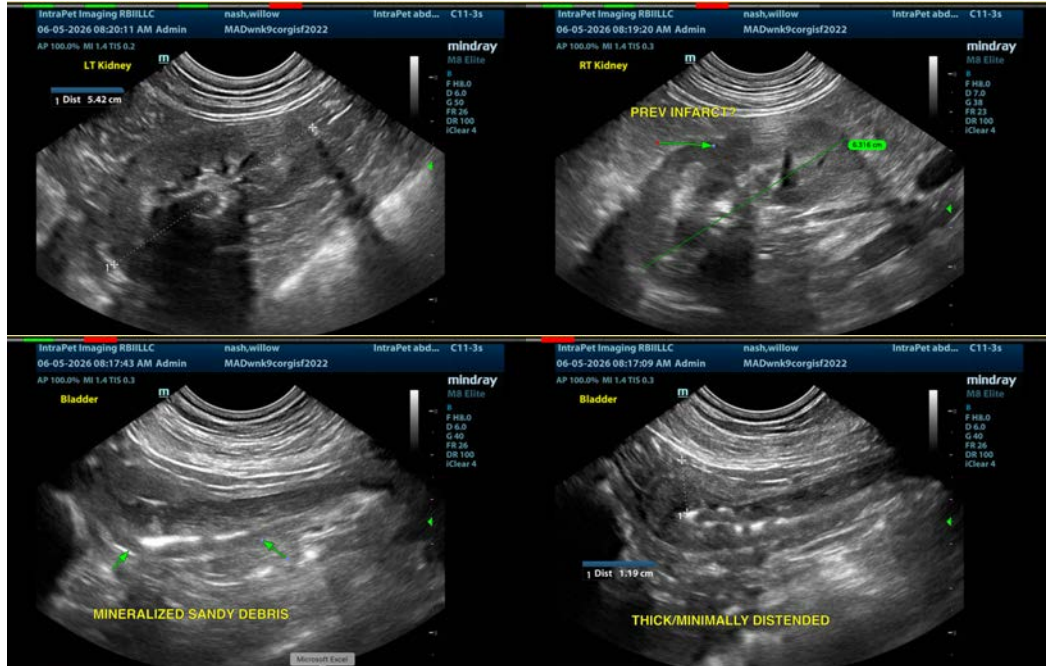
The bladder wall changes are most consistent with chronic cystitis. The mineralized material is most consistent with sandy debris/small stones. The urinalysis submitted shows evidence of struvite crystalluria, which would coincide with concurrent infection. Strongly recommend a urinalysis with a culture and sensitivity (must be off antibiotics for at least 3-5 days). Consider evaluation for predisposing factors for chronic UTIs. These would include physiologic factors (chronic renal failure, Cushing's disease, immunosuppression, diabetes, etc.), or anatomic abnormalities such as obesity, hooded vulva, stones, congenital abnormalities, etc. Ultimately, a cystoscopy may be necessary if no obvious causes are identified. Depending on the bacterial present, other potential treatment strategies may be possible.

REFERRING VET

Dr. Cangro

INVOICE

75740



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.

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