

PATIENT PRESENTING CLINICAL SIGNS

Lucy Boyle Patient has had history of inappropriate urination in the house, incontinence - that has worsened over the past few weeks

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: UA shows significant blood, acidic pH at 6.5, no other significant findings and negative urine culture.

BREED

Toy Poodle

LIMITED ULTRASONOGRAPHIC EXAMINATION

Urinary System

SEX

Spayed Female

The urinary bladder is moderately distended with anechoic urine. The Bladder wall largely appears smooth with normal thickness, but in the region of the trigone there is an area of irregular tissue measuring approximately 0.70 cm x 0.44 cm, which appears to extend somewhat into the proximal urethra, which measures at 0.44 cm. Findings could be consistent with a neoplastic lesion, polypoid lesion, etc.

AGE

15 Years

The left kidney has a normal shape and size (3.75 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

11 Pounds

The right kidney has a normal shape and size (3.72 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.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

- Irregular mass effect visualized at the cystourethral junction – Findings are concerning for a transitional cell carcinoma, although a benign polyp is also possible. Recommend urinalysis and culture.

IMAGING

PERFORMED BY

Dr. Danielle Kitz

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Woodlands AH

There is an abnormal small mass effect visualized at the cystourethral junction. This could represent a small transitional cell carcinoma, a polypoid lesion, etc. There appears to be some invasion into the proximal urethra. Recommend a urinalysis, culture, and a traumatic catheterization or cystoscopy to obtain cells for cytologic or histopathologic evaluation. If this cannot be performed, a urine BRAF test could be performed. If a BRAF test is positive, this would increase the likelihood of a transitional cell carcinoma. If the BRAF test is negative, this is non-diagnostic and additional testing would be warranted.

REFERRING VET

Dr. Danielle Kitz

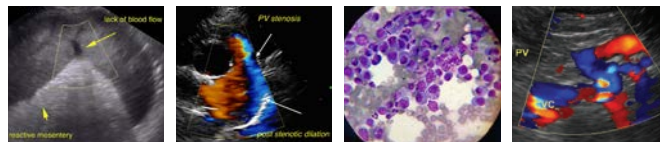
INVOICE

44854

Recommend three view thoracic radiographs to evaluate for possible concurrent thoracic disease/involvement.

DATE

8/23/23



PATIENT

Lucy Boyle

SPECIES

Canine

BREED

Toy Poodle

SEX

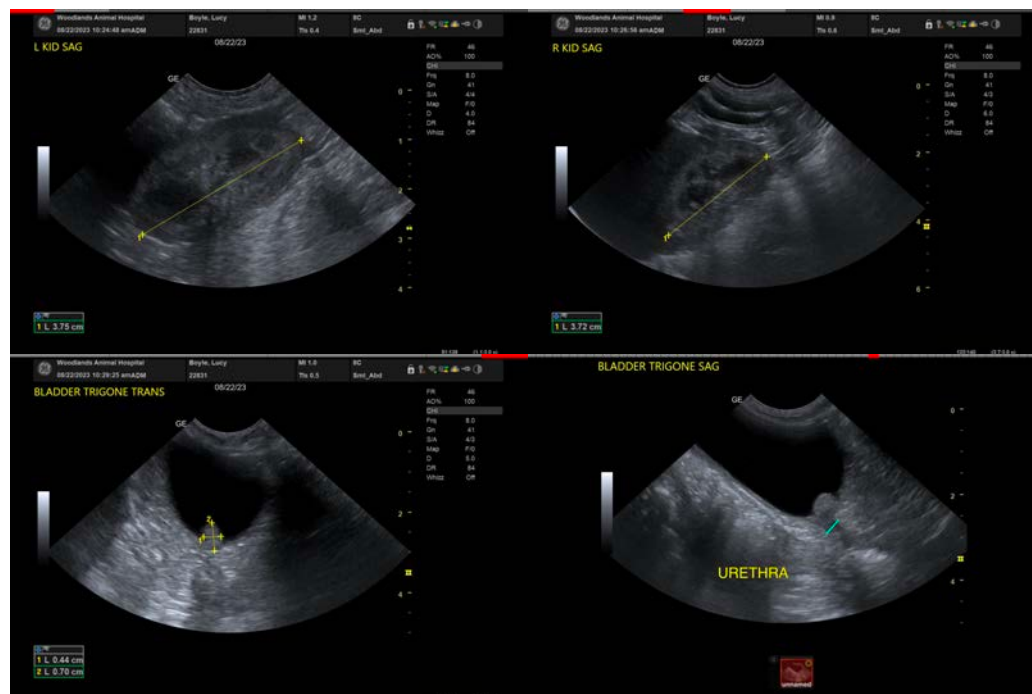
Spayed Female

AGE

15 Years

WEIGHT

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Medicine)

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.

IMAGING PERFORMED BY

Dr. Danielle Kitz

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HOSPITAL NAME

Woodlands AH

REFERRING VET

Dr. Danielle Kitz

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