



PATIENT PRESENTING CLINICAL SIGNS

Coco Hogue Patient has a history of recurrent UTI's. Most recent urinalysis showed rafts of epithelial cells.

SPECIES Abnormal PE/Chem/CBC/UA Results: 12-30-22 UA shows SG 1.031, pyuria (WBC 30-50/HPF), hematuria (RBC 15-20/HPF), Bacteria, rafts of epithelial cells. Culture grew Enterococcus, sensitive to most antibiotics. Patient also had an Enterococcus UTI in September which cleared with appropriate antibiotic therapy (negative culture post-antibiotics). Chem/CBC/T4 last May were WNL

Canine

BREED Current Medications Amoxicillin, Probiotics, D-mannose, Meloxicam, Gabapentin Radiographic Findings None taken

Bichon Frise

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

FS *Urinary System*

AGE The urinary bladder was normal in size and tone. Mildly prominent non-homogenous ventroapical bladder wall measuring 0.42 cm in width was present. No urinary bladder tumors were present. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild non-particulate particulate sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus. A solitary symmetrical dependent calculus was present measuring 0.92 cm. The ureteral papillae were normal. The ureters were not visible which is normal.

13yr

WEIGHT Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral pinpoint medullary mineral was present. The left kidney measured 4.1 cm in length. The right kidney measured 4.6 cm in length

17lb

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

The area of the aortic trifurcation was free of pathology.

IMAGING PERFORMED BY

Sara Hansen

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.36 cm width at the caudal pole and 1.7 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.32 cm width at the caudal pole and 1.4 cm length.

HOSPITAL NAME

Santa Clara AH

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

REFERRING VET

Dr. Brasted-Maki

INVOICE

12678ag

Liver/Gallbladder

DATE

1/11/2023

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. No evidence of a portosystemic shunt. The



PATIENT

gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Coco Hogue

Gastrointestinal

SPECIES

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

Canine

BREED

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Bichon Frise

Normal visible colon wall layers were present with apparent formed feces in lumen.

SEX

Pancreas

FS

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

AGE

13yr

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

17lb

ULTRASONOGRAPHIC FINDINGS

- Cystic calculus with mild ventroapical cystitis pattern, mild concurrent non-dependent urinary bladder sediment
- Mild chronic kidney changes-no evidence of pyelonephritis

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A recheck urine C/S on a sterile urine sample is recommended. Cystotomy with stone analysis, urinary bladder biopsies +/- C/S to rule out embedded infection is warranted given potential for cystic calculus as a nidus for recurrent infection.

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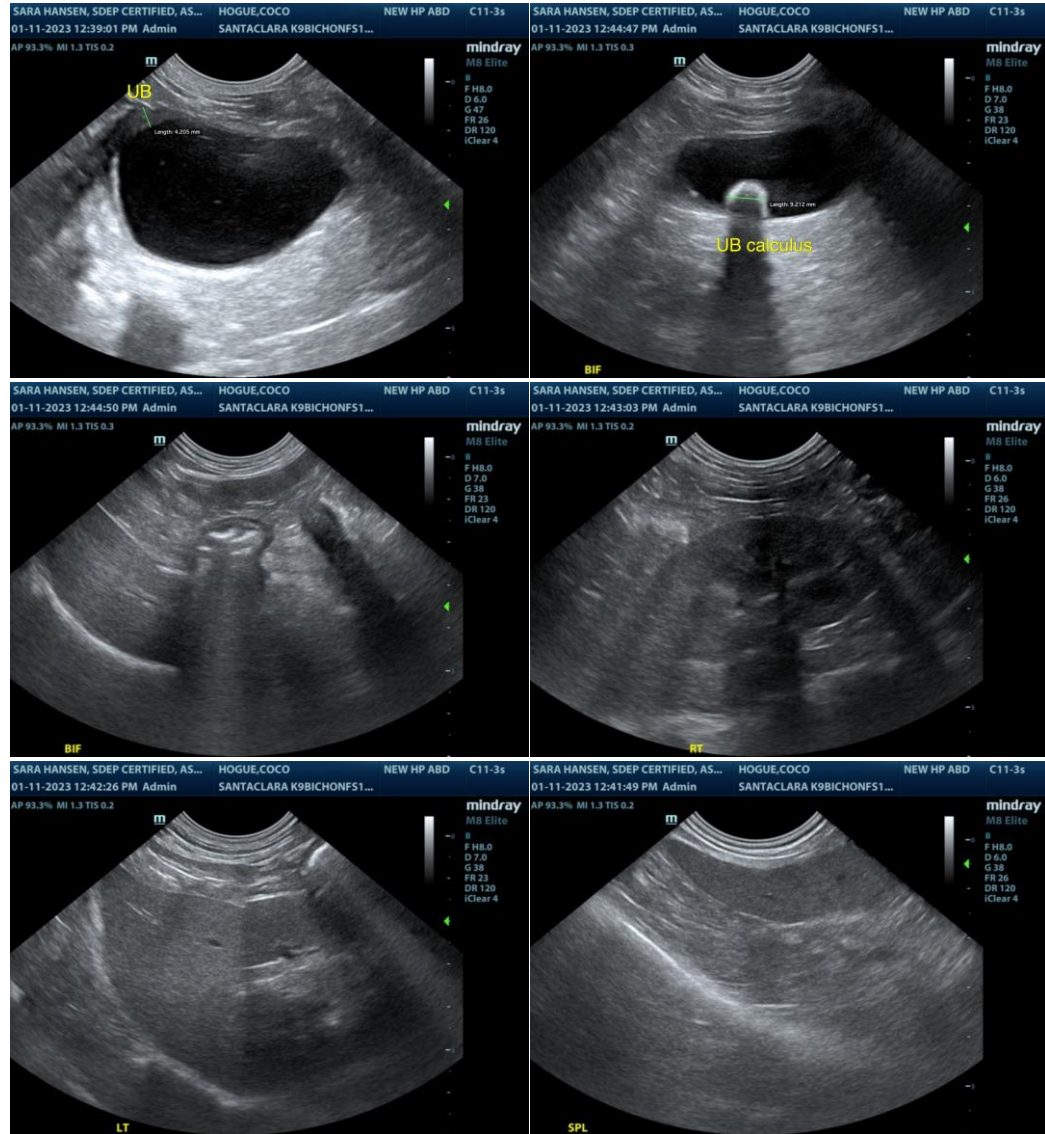
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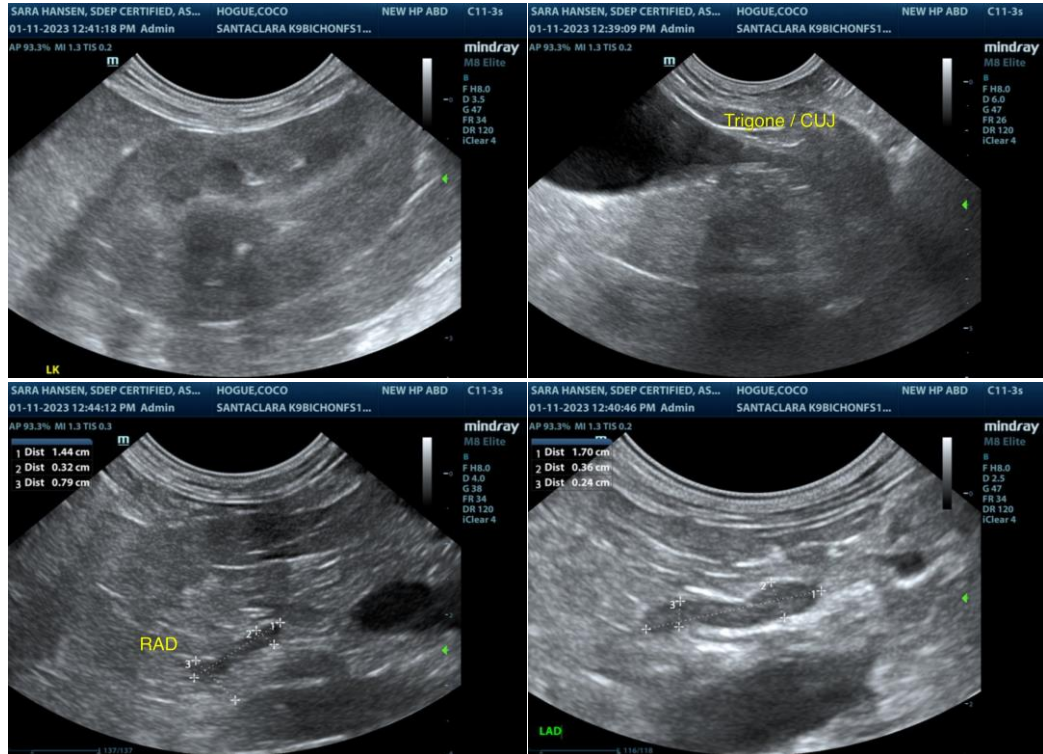
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com