



PATIENT

Vinny Oliver

SPECIES

Canine

BREED

French Bulldog

SEX

MN

AGE

5yr

WEIGHT

38lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Crook

HOSPITAL NAME

Rivers Edge Pet
Medical Center

REFERRING VET

Dr Dana Tsuchida

INVOICE 23535

DATE
01/13/2025

PRESENTING CLINICAL SIGNS

Clinical & PE History (please bullet point/limit clinical history): Intermittent hematuria noted several times - resolved with Amoxicillin, Prazosin, Carprofen History of UTI per O 10/24/25 - hematuria noted, Amoxi/Clav rx'ed 11/20/25 - hematuria noted, urinary ultrasound performed - moderate accumulated urinary bladder lumen mineral/calculi and normal bilateral kidneys. Urinary rx diet started after this visit. Amoxicillin, Prazosin, Carprofen rx'ed. Resolved clinical symptoms on 12/3/25. 12/14/25 - hematuria noted. Amoxicillin, Prazosin, Carprofen rx'ed. Current Medications: Probiotic Cytopoint q2 months neoPoly Dex 1 drop to OS BID Dorsalamide to OS TID

Abnormal PE/Chem/CBC/UA Results: Laboratory Abnormalities (please indicate if WNL):
12/13/25 - BUN 6 mg/dL (7-27), otherwise WNL for CBC and CHEM 10 12/13/25 - UA: Proteinuria 100mg/dL, Hematuria 250 Ery/uL, RBC 23/HPF, unclassified crystals 1-5/HPF 12/3/25 - BG 50 mg/dL, Blood 250 Ery/uL, RBC > 50/HPF 10/27/25 - CHEM 10 WNL Radiographic Findings (if applicable): Large urinary bladder

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was distended in size with normal tone and normal urinary bladder wall. The trigone and cystourethral junction were free of obstructive pathology. The proximal urethra exhibited normal structure with mild decreased tone to urine distension to ~ 3-4 cm depth with obscured vision distal owing to pelvic shadowing. Urethral distension measured ~ 1 cm in diameter. No current evidence of previously noted urinary bladder or lumen mineral, or calculi. No evidence of inflammation or tumors.

A brief sonographic assessment of the distal urethra in the area of the penis revealed suspect distal urethral to penile urethral shadow measuring ~ 1 cm in diameter.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation or hydronephrosis. The left kidney measured 5.3 cm in length. The right kidney measured 5.6 cm in length.

ULTRASONOGRAPHIC FINDINGS

Primary

- Sonographically unremarkable yet distended urinary bladder and visible proximal urethra.
- Suspect distal urethral shadowing at level of penis.
- Normal bilateral kidneys

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although indistinctly visualized yet given patient history and distended appearance to the urinary bladder and visible proximal urethra prior to pelvic shadowing, high concern for distal urethral obstruction at the level of the penis suspect secondary to previous urinary bladder mineral moving into the urethra. The suspect area of distal urethral shadowing did not overtly appear to coincide with the os penis.



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Recheck radiographs as well as urethral catheterization to assess urethral patency is recommended. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

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Given timeframe between ultrasound and interpretation, correlation with current clinical signs +/- recheck lower urinary tract sonogram to assess bladder and proximal urethral size is warranted.

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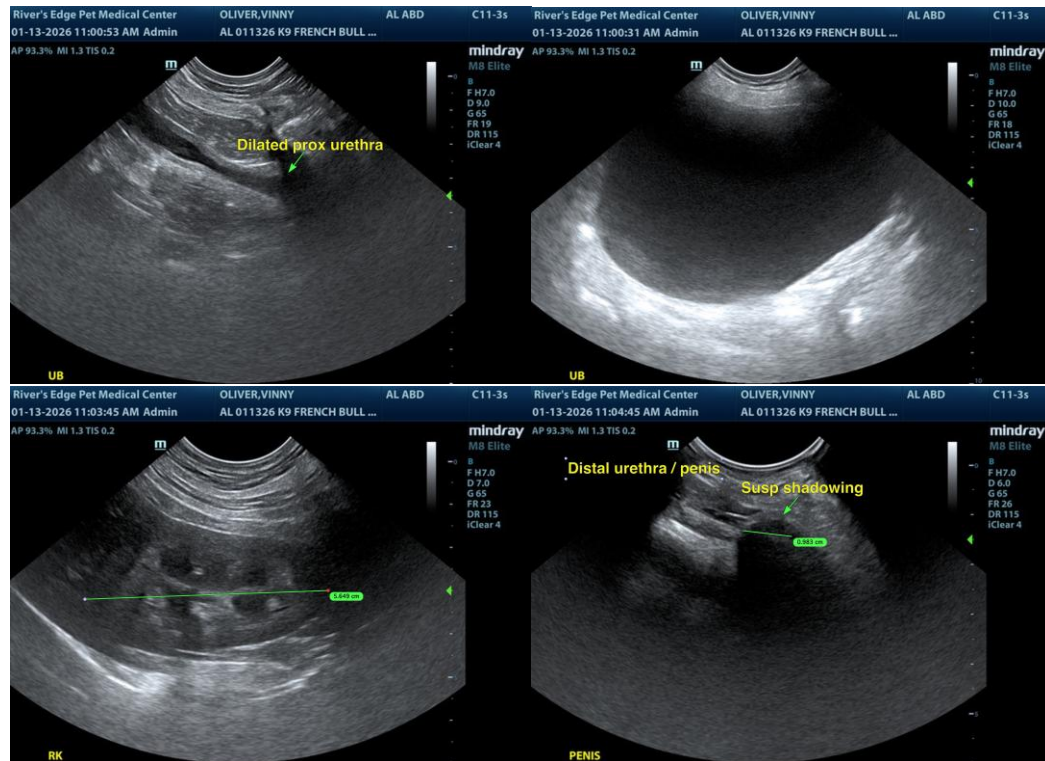
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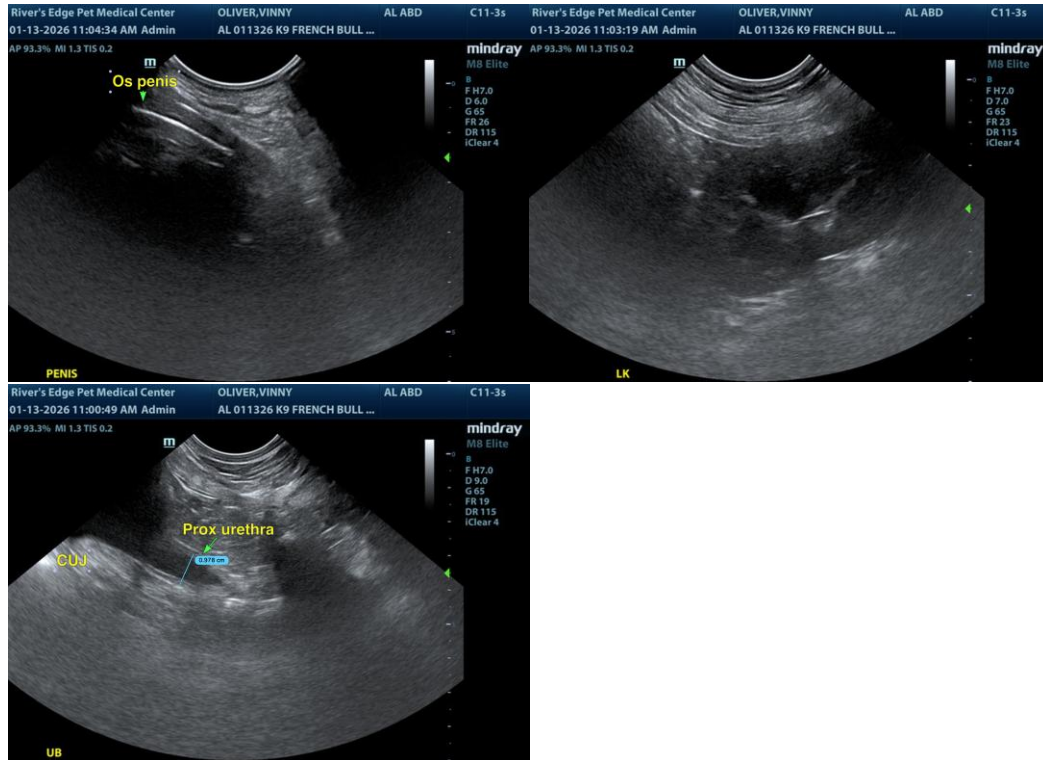
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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