



PATIENT

Oliver Lansing

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

9 Years

WEIGHT

23.1 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan,
RDMS

HOSPITAL NAME

Norfolk County
Veterinary Services

REFERRING VET

Dr. Amelia Ragon DVM

INVOICE

13353

DATE

01/22/26

PRESENTING CLINICAL SIGNS

Study contained 11 images of the urinary bladder only.

- History of a benign bladder mass - cystotomy performed 4/25/25. New epilepsy, managed on Zonisamide. Elevated liver values (ALP 563, ALT 154). Also on Ursodiol 250 mg/ml - 0.5 ml BID.
- *Previous AUS 4/4/25: Non-specific thickening of the apical urinary bladder - Ddx: apical cystitis vs emerging neoplasia (thought less likely) - R. McKenzie Daniel, DABVP
- Study limited to urinary bladder after surgical removal of the benign mural thickening.

LIMITED ULTRASONOGRAPHIC EXAMINATION

The urinary bladder and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor dependent particulate urine sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted. No evidence of recurrent wall thickening or masses. The trigone and cystourethral junction were free of pathology. The residual prostate was sonographically normal measuring 1.1 cm in diameter.

ULTRASONOGRAPHIC FINDINGS

- Sonographically normal urinary bladder, residual prostate and proximal urethra with minor urine sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of recurrent urinary bladder mural pathology.





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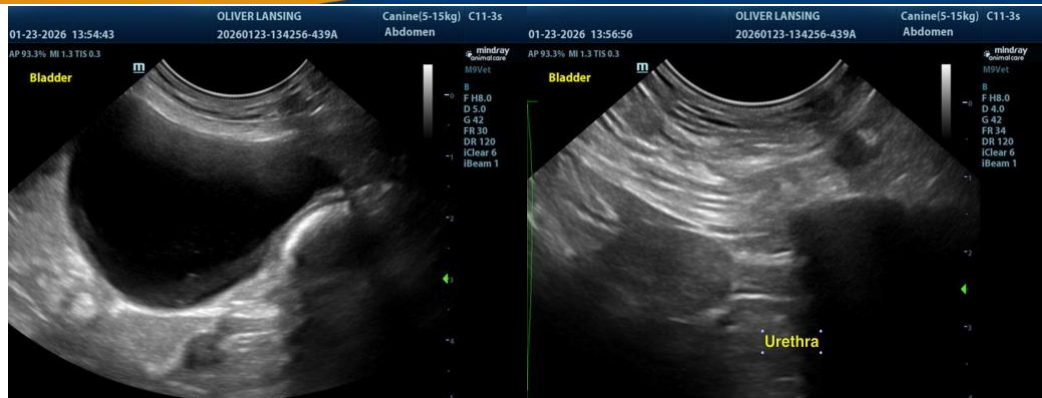
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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