



PATIENT	PRESENTING CLINICAL SIGNS
Monkey Weinke	Intermittent hematuria for past several months
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	<p>The urinary bladder presented uniformly mild thickened urinary bladder wall isoechoic to the adjacent normal urinary bladder wall. Normal urinary bladder size and tone was present. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The trigone and urinary bladder neck were free of overt mural pathology. No definitive urinary bladder masses were noted. Anechoic urine was present in the lumen with moderate, non-dependent, congealed, variably echogenic, urinary bladder sediment with mild dependent hyperechoic sand. The ureteral papillae were normal. The ureters were not visible which is normal. The urethra exhibited normal structure and tone to a depth of 2.0 cm.</p> <p>The area of the aortic trifurcation was free of pathology.</p> <p>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 or pyelectasia was present. The left kidney measured 3.8 cm in length. The right kidney measured 3.9 cm in length.</p>
Pug	
SEX	
FS	
AGE	
11 y	
WEIGHT	
15 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	No overt pathology was noted in the area of the left or right adrenal glands.
IMAGING PERFORMED BY	Spleen
Jill Ramachik	The spleen was normal in size and contour exhibiting primarily a finely textured and homogenous parenchyma. A solitary, nondisruptive, well-demarcated, hypoechoic nodule noted in the medial parenchyma measuring 0.59 cm in diameter was present.
HOSPITAL NAME	Liver/ Gallbladder
Clarity Imaging LLC	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Subjective adequate to normal hepatic vascular volume was noted. The gallbladder was non-distended in size containing primarily anechoic content with mild, non-dependent, nonorganized gallbladder debris. The cystic and common bile ducts were normal.
REFERRING VET	Gastrointestinal
CC Sheldon	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild ingesta exhibiting subtle progressive distal acoustic shadowing.
INVOICE	
16017	
DATE	
1/31/23	



PATIENT

Monkey Weinke

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild segmental non-shadowing ingesta / chyme.

SPECIES

Canine

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

BREED

Pug

Pancreas

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 were evident.

SEX

FS

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

AGE

11 y

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Cystitis pattern with moderate dependent to non-dependent urinary bladder sediment / sand
- Nonspecific yet subjective benign splenic nodule
- Mild chronic renal changes - no overt pyelonephritis
- Minor hepatic parenchyma remodeling with mild gallbladder debris (non-mucocele)

WEIGHT

15 lbs.

Secondary Findings

- Gastrointestinal ingesta - probable recent meal ingestion

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine C/S on a sterile urine sample, if not recently done, is recommended with potential antibiotic therapy based on C/S results if an underlying infection is confirmed. Screening BRAF Assay is warranted yet no obvious evidence of urinary bladder neoplastic criteria was noted.

IMAGING PERFORMED BY

Jill Ramachik

HOSPITAL NAME

Clarity Imaging LLC

Sonographic monitoring of the splenic nodule for evidence of progression could be considered. Hepatosupportive medications including Denamarin and Ursodiol are recommended if evidence of cholestasis. Pending urine C/S, empirical therapy for cystitis is suggested.

REFERRING VET

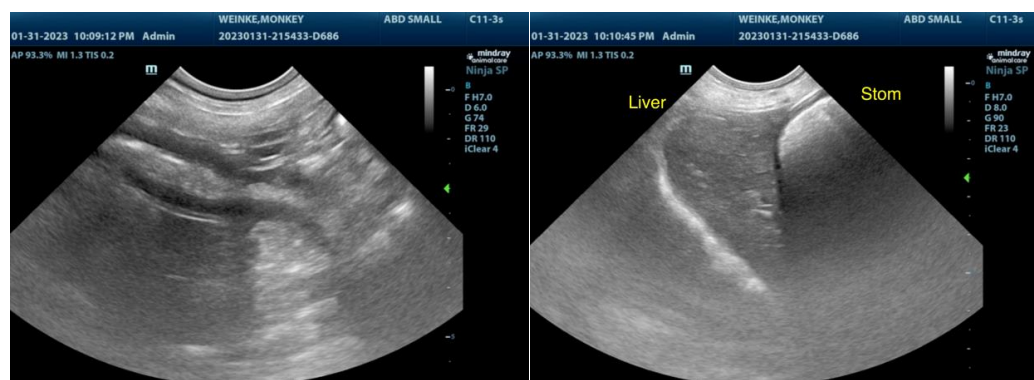
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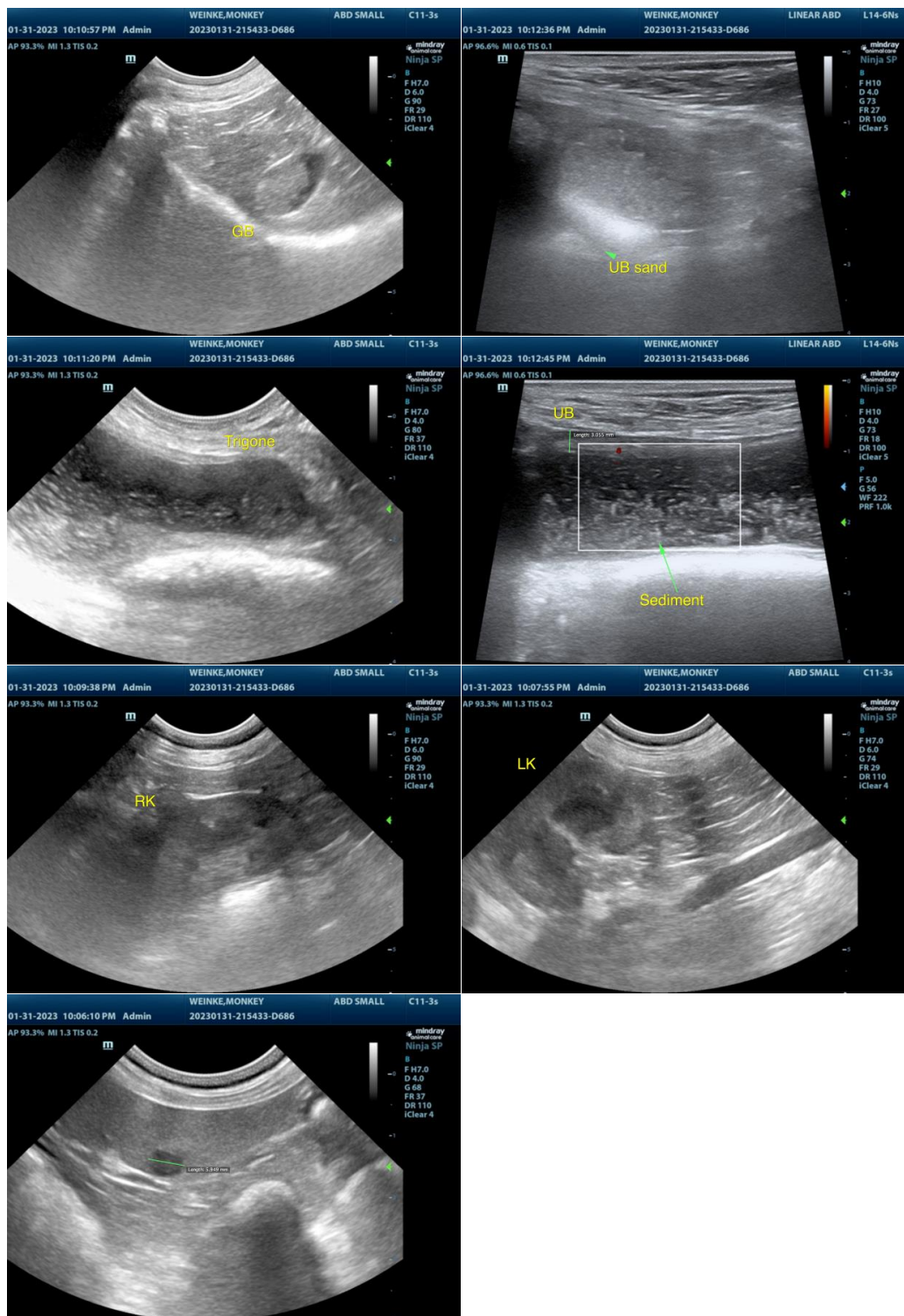
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology



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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