



PATIENT

Lizzy Morrison

SPECIES

Canine

BREED

Shepherd X

SEX

Spayed Female

AGE

10 Years

WEIGHT

50 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

REFERRING VET

Dr. Barbara Brasted-Maki

INVOICE

26112

DATE

10/6/21

PRESENTING CLINICAL SIGNS

Patient presented about 3 weeks ago with hematuria and inappropriate urination (suspected incontinence). Exam is largely unremarkable for a senior patient. Initial urinalysis shows dilute urine, hematuria, pyuria, and rare cocci. Treatment with Amoxicillin resulted in no change in clinical symptoms. Urine culture was performed and was negative. No abnormalities were seen on abdominal radiographs. Patient is otherwise clinically well. Current Medications Probiotics, glucosamine; Trazodone for procedure.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone without evidence of distention. Mild to moderate non-dependent particulate urinary bladder sediment was present. No calculi. Mild non-homogeneous mass was noted within the urinary bladder neck and proximal urethral lumen, measuring an estimated 5.0 cm in length x 1.2 cm in width. Pinpoint hyperechoic foci were noted within the mass, suggestive of pinpoint mineralization. The mass did not appear to be overtly obstructive to urine outflow. The mass extended into the proximal urethral lumen to a depth of approximately 4.0 cm.

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.6 cm. The right kidney measured 7.0 cm. No overt pyelonephritis.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.1 cm at the cranial pole and 0.58 cm at the caudal pole. The left adrenal gland measured 0.52 cm at the cranial pole and 0.58 cm at the caudal pole.

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.

Liver

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. A solitary, non-expansive, subtle uniform echogenic parenchymal nodule was present measuring 1.8 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.



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Gastrointestinal

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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.

SPECIES

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.

Canine

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

BREED

Pancreas

Shepherd X

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.

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed Female

- Urinary bladder neck and proximal urethral mass – neoplasia (i.e., transitional cell carcinoma or other) likely. Potential for cystitis, urethritis possible, yet considered unlikely.
- Mild age related renal changes
- Mild gallbladder debris
- Mild hepatic parenchymal remodeling with solitary, subtly echogenic parenchymal nodule – probable benign or age related hepatic parenchymal changes with focal area of hyperplasia or lipogranuloma.
- Mild gallbladder debris – incidental

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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

Cytospin cytology of free catch urine sample to assess for atypical epithelial cells and/or BRAF assay may be considered. However, if negative, biopsy of the urinary bladder neck and proximal urethral mass may be required for definitive diagnosis. The mass does not appear to be amenable to surgical resection based on location. Empirically, Piroxicam trial +/- analgesic (if evidence of stranguria) and sonographic monitoring would be reasonable. No overt evidence of regional metastasis. =

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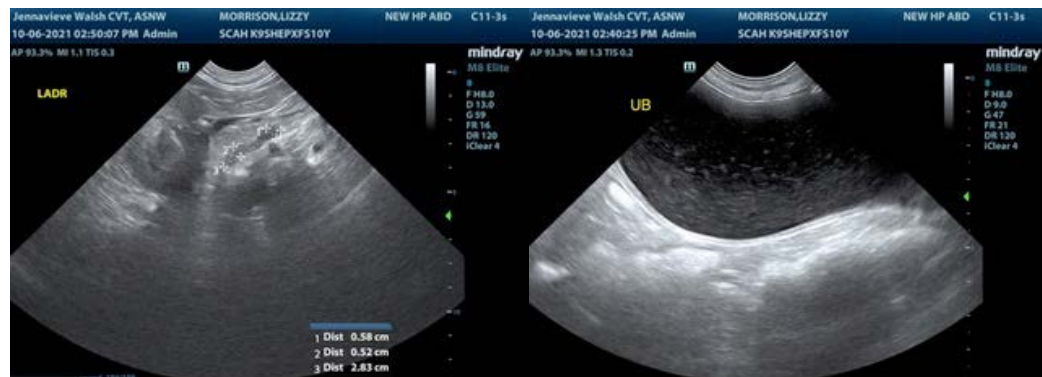
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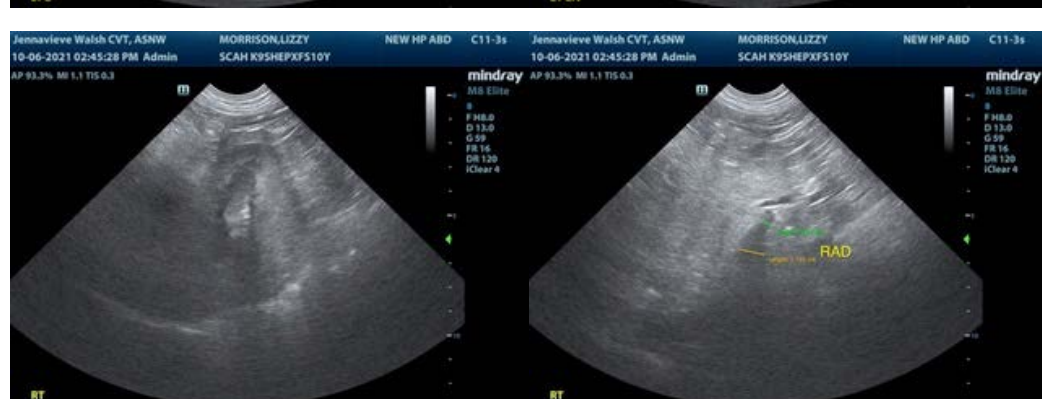
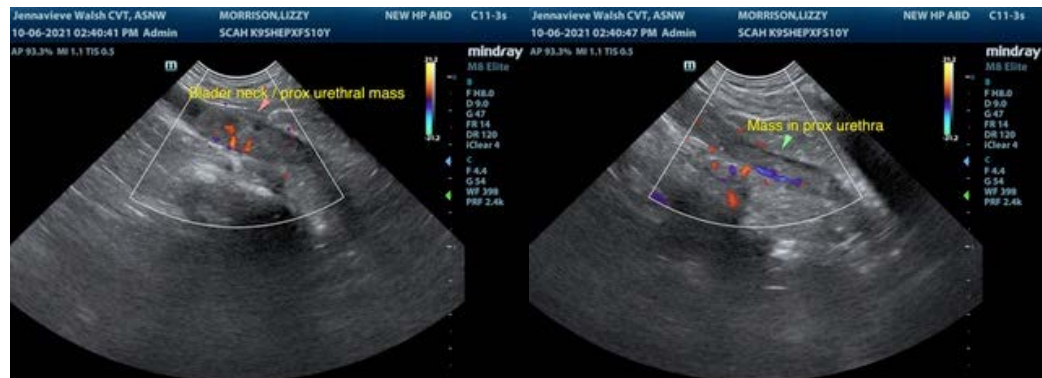
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Canine

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

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