



PATIENT

Zoey McCullough

SPECIES

Canine

BREED

Bichon Frise Mix

SEX

FS

AGE

14 Years

WEIGHT

20 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap Animal
Hospital

REFERRING VET

Dr. Jennifer Todd

INVOICE

48340

DATE

11-15-21

PRESENTING CLINICAL SIGNS

Zoey is a 14 year old, FS, Bichon Frise mix who was presented for two week duration of pollakiuria on 11/18/21. Free catch urinalysis in-house showed mild pyuria and 1+ protein. On exam, Zoey has moderate dental tartar and a firm, round, 2 inch, mid-abdominal mass was palpable just cranial to bladder. Abdominal radiographs showed indistinct round, mid-abdominal mass effect cranial to bladder which displaces the colon laterally to body wall.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal tone. A moderately sized to expansive nonhomogeneous mass exhibiting mineralization was associated with the apical urinary bladder wall extending cranially into the caudal to mid abdomen measuring approximately 6.0 x 4.0 cm. The discernible urinary bladder walls in the ventral and dorsal urinary bladder extending into the trigone and cystourethral junction, appeared to be mildly thickened with mild asymmetrical luminal surface contour. However, minimal urine was present in the bladder prohibiting full evaluation of the discernible urinary bladder wall. A focal nonobstructive area of mineral was noted in the dependent trigone lumen. The ureteral papillae were normal. The ureters were not visible which is normal.

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination was 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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Focal areas of nonobstructive medullary mineral to small renoliths primarily in the lateral diverticuli of both kidneys was present. Small cortical cysts were present in both kidneys as well. No evidence of pelvic dilation was present. The left kidney measured 4.7 cm in length. The right kidney measured 4.9 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.57 cm width in the cranial pole and 0.71 cm width in the caudal pole.

The right adrenal gland was not definitively visualized.

Spleen

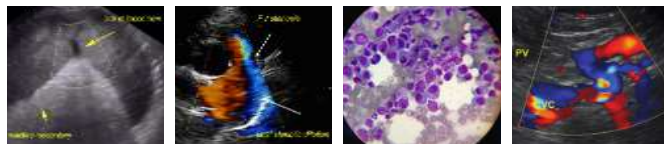
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver / Gallbladder

The liver was subjectively normal in structure and contour and exhibited potential for mild generalized enlargement. A solitary nonexpansive echogenic mid parenchymal nodule was present. 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.



PATIENT	The gallbladder was non distended in size with dependent nonorganized gallbladder debris with potential emerging mineralization. No evidence of gallbladder or peripheral inflammation. The cystic duct and common bile ducts were normal without evidence of dilation.
Zoey McCullough	
SPECIES	<i>Gastrointestinal</i>
Canine	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.
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 Mix	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
FS	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This is likely consistent with minor age related pancreatic changes and considered incidental.
AGE	<i>Free Abdomen</i>
14 Years	No overt lymphadenopathy or peritoneal effusion was present.
WEIGHT	ULTRASONOGRAPHIC FINDINGS
20 lbs	Primary
INTERPRETED BY	<ul style="list-style-type: none"> Moderately sized to expansive nonhomogeneous mass exhibiting mineralization associated with the apical urinary bladder extending cranially into the caudal to mid abdomen. Concurrent subjective mild thickened trigone and cystourethral junction with focal luminal mineral.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Secondary
IMAGING PERFORMED BY	<ul style="list-style-type: none"> Mild hepatic parenchymal remodeling with likely benign nodule - probable focal nodular hyperplasia, lipogranuloma. Bilateral chronic renal changes with nonobstructive medullary mineral / renoliths and cortical cysts. Mild gallbladder debris (nonmucocele).
Dr. Jennifer Todd	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
HOSPITAL NAME	The nonhomogeneous to mineralized mass in the area of the apical urinary bladder is most likely urinary bladder origin. A minor potential for an unspecified mass of nonurinary bladder origin impinging upon the urinary bladder, exhibiting similar clinical signs, is considered less likely. Regardless, neoplastic criteria is present. The possibility of more extensive urinary bladder involvement or potential extensive bladder tumor cannot be definitively excluded. Further assessment may include pending cytology or CT evaluation, oncology consult, +/- surgical consult or planning via CT as no overt evidence of regional metastasis was obvious. Three view chest radiographs recommended.
Lambs Gap Animal Hospital	
REFERRING VET	
Dr. Jennifer Todd	
INVOICE	
48340	
DATE	
11-15-21	



PATIENT

Zoey McCullough

SPECIES

Canine

BREED

Bichon Frise Mix

SEX

FS

AGE

14 Years

WEIGHT

20 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap Animal
Hospital

REFERRING VET

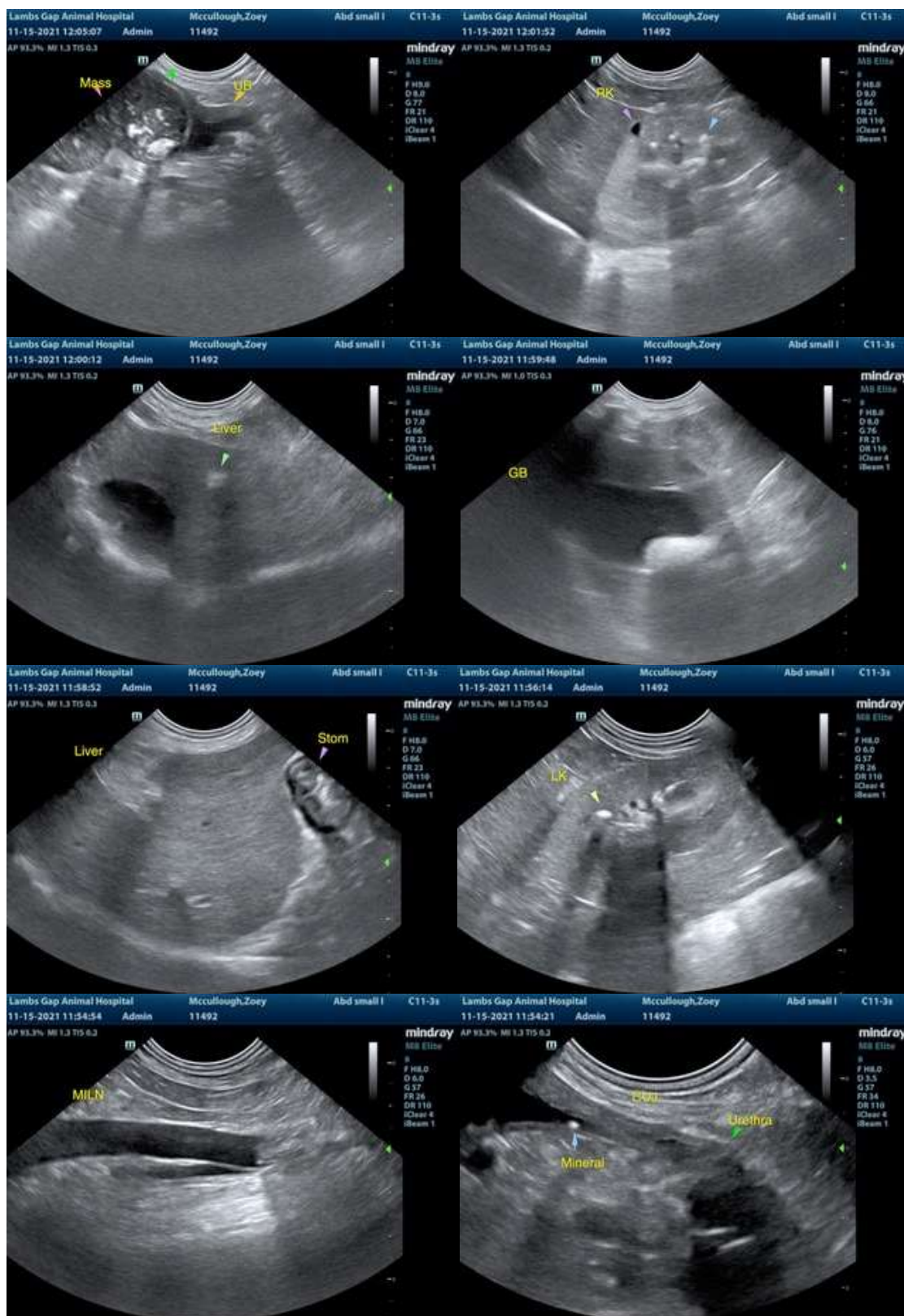
Dr. Jennifer Todd

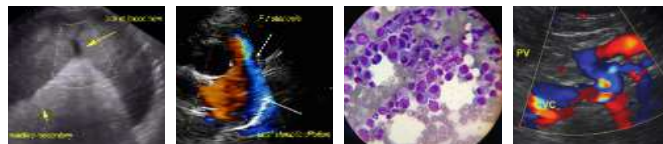
INVOICE

48340

DATE

11-15-21





PATIENT

Zoey McCullough

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.

SPECIES

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.

BREED

Bichon Frise Mix

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

FS

AGE

14 Years

WEIGHT

20 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap Animal
Hospital

REFERRING VET

Dr. Jennifer Todd

INVOICE

48340

DATE

11-15-21