

**PATIENT**

Kennedy Bauchspies

**SPECIES**

Canine

**BREED**

Bernese Mtn Dog

**SEX**

Neutered Male

**AGE**

10 years

**WEIGHT**

116 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Stanglein VC

**REFERRING VET**

Dr. Green

**INVOICE**

12518

**DATE**

11.2.2021

**PRESENTING CLINICAL SIGNS**

History: Urinary issues, concern for urinary bladder mass, obese

Medication: Thyro-tabs

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

A mildly expansive, mass noted in the area of the mid to caudal dorsal urinary bladder trigone extending into the area of the cystourethral junction without overt evidence of proximal urethra invasion, was present. The mass measured approximately 4.3 cm x 2.6 cm. The mass exhibited nonhomogeneous parenchyma with luminal surface polyploid component. Anechoic urine was otherwise present. No evidence of calculi was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the left kidney. 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 was present. The left kidney measured 8.0 cm in length.

The right kidney exhibited generalized replacement of discernable corticomedullary parenchyma with anechoic fluid with only evidence of Inter-diverticular septa present. Concurrent generalized moderate right hydronephrosis exiting the right kidney extending caudally to the level of the urinary bladder was present. The right hydronephrosis contained anechoic fluid without overt evidence of calculi. The right ureter dilation measured 1.4 cm width. The right kidney measured 8.1 cm in length.

**Adrenal Glands**

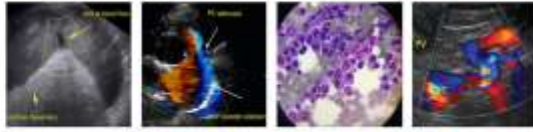
The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.57 cm width in the cranial pole and 0.68 cm width in the caudal pole. The right adrenal gland measured 0.59 cm width in the cranial pole and 0.69 cm width in the caudal pole.

**Spleen**

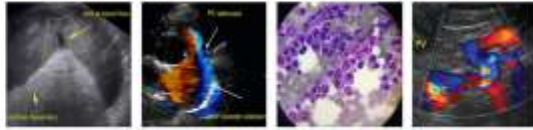
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute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

**Liver/ Gallbladder**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to



<b>PATIENT</b>	benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion.
Kennedy Bauchspies	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>SPECIES</b>	<b><i>Gastrointestinal</i></b>
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.
<b>BREED</b>	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.
Bernese Mtn Dog	
<b>SEX</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
Neutered Male	<b><i>Pancreas</i></b>
<b>AGE</b>	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.
10 years	<b><i>Free Abdomen</i></b>
<b>WEIGHT</b>	No overt lymphadenopathy or peritoneal effusion was present.
116 Pounds	<b>ULTRASONOGRAPHIC FINDINGS</b>
<b>INTERPRETED BY</b>	<b><i>Primary Findings</i></b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none"> <li>• Urinary bladder dorsal trigone mass extending into the area of the cystourethral junction</li> <li>• Age-related left kidney</li> <li>• Right kidney end-stage hydronephrosis with concurrent generalized right hydroureter - likely secondary to right ureteral papilla obstruction at the level of the urinary bladder owing to the urinary bladder mass with potential for distal right ureter invasion</li> </ul>
<b>IMAGING PERFORMED BY</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
Rebekah Jakum, CVT ARDMS/RVT	The urinary bladder mass was consistent with neoplastic criteria i.e., transitional cell carcinoma or other. The mass did not appear to be amendable to surgical resection, given its location. No overt evidence of concurrent left ureteral papilla obstruction at this time. No overt evidence of regional metastasis.
<b>HOSPITAL NAME</b>	
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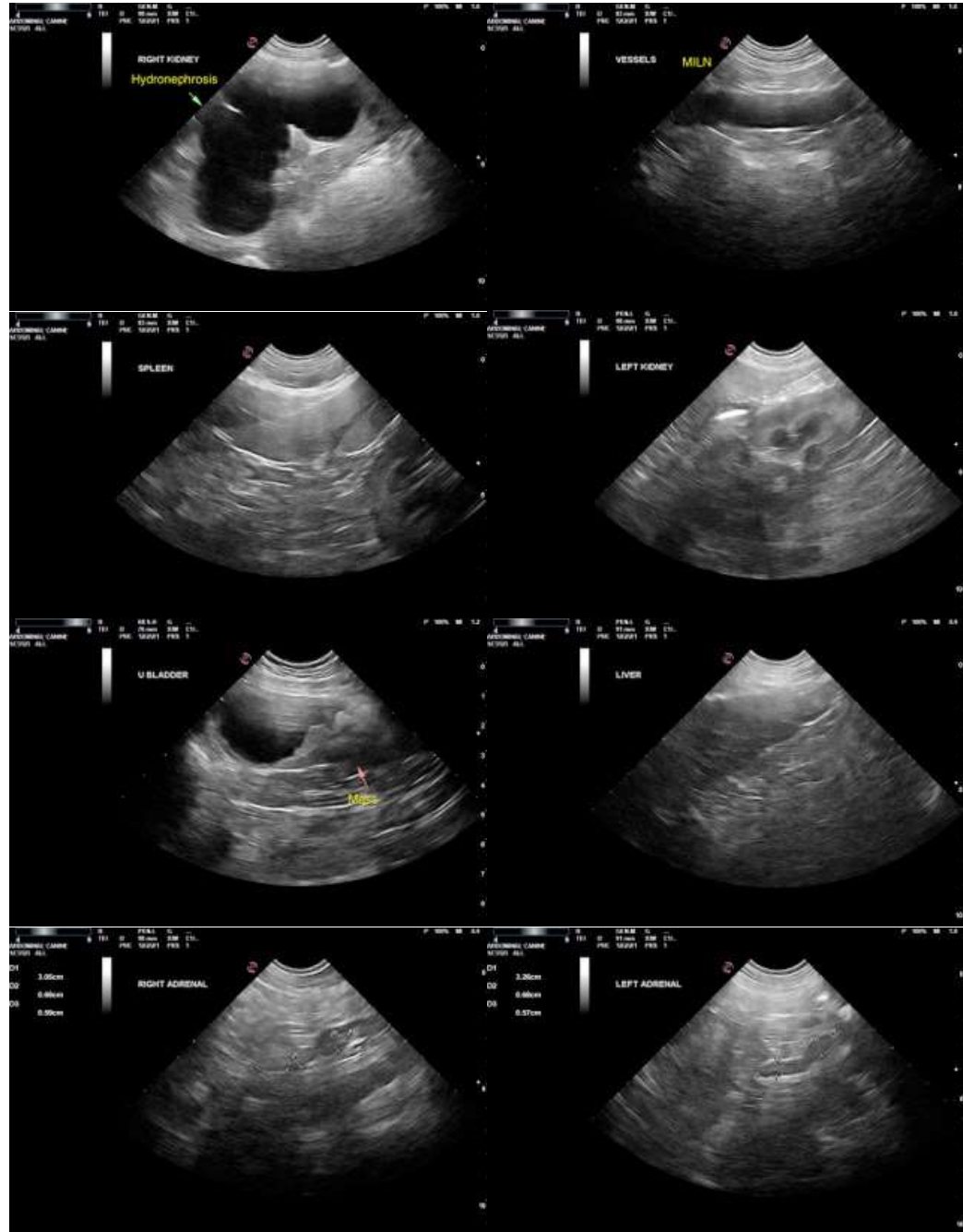
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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)**  
[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)

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