



PATIENT PRESENTING CLINICAL SIGNS

Carley Burke Flash US revealed a bladder mass. Urinary system evaluation. Renal values are elevated, but stable. No urinary tract symptoms. *Study limited to urinary system
Abnormal PE/Chem/CBC/UA Results: SDMA 17; creat 1.9; BUN 41.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Mixed

A sessile based mass in the area of the apical to ventro-apical urinary bladder wall extending mildly into the urinary bladder lumen measuring approximately 1.7 cm x 1.4 cm. Associated mild to variable wall thickening involving the apical and ventral urinary bladder wall around the mass was present with the apical wall width measuring up to 0.7 cm. Pinpoint areas of mineralization associated with the urinary bladder mass were noted. Doppler evaluation of the mass confirmed blood flow within the mass. Anechoic urine was present in the lumen with no calculi. The ureteral papillae were normal. The ureters were not visible which is normal.

SEX

FS

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

AGE

13 Years

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. Pinpoint to focal areas of medullary mineral were noted. Moderately sized corticomedullary cyst was present in the caudal pole of the left kidney measuring 2.0 cm in diameter. Pinpoint to focal areas of medullary mineral along with concurrent small cortical cysts were noted in the right kidney. The left kidney measured 5.9 cm in length. The right kidney measured 5.5 cm in length.

WEIGHT

57.3 lbs

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

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

- Sessile based apical to ventro-apical pinpoint mineralized urinary bladder mass with associated regional apical to ventral wall thickening.
- Bilateral chronic renal changes with pinpoint medullary mineral and variably sized cysts.

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although histopathology is required for a definitive diagnosis, the urinary bladder mass is most suggestive of transitional cell carcinoma versus other neoplasia while potential for regional cystitis/ polyploid cystitis possible yet considered less likely. Screening BRAF assay may be considered; however, if negative, biopsy of the mass would be required for a definitive diagnosis. Given the mass location, surgical options may be a possibility in this patient. Oncology or surgical consultation may be considered. No evidence of regional metastasis.

HOSPITAL NAME

Falmouth Animal
Hospital

REFERRING VET

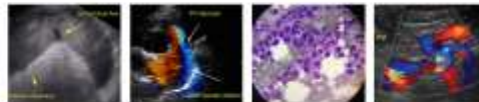
Lilan Hauser, DVM

INVOICE

48616

DATE

11-28-21



PATIENT

Carley Burke

SPECIES

Canine

BREED

Mixed

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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)
 info@SonoPath.com