

PATIENT

Harley Vickers

SPECIES

Canine

BREED

Australian Shepherd

SEX

Spayed Female

AGE

9 Years

WEIGHT

48 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

**IMAGING
PERFORMED BY**

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

MountainView Animal
Hospital

REFERRING VET

Dr. Bridget Landon

INVOICE

12766

DATE

12/19/25

PRESENTING CLINICAL SIGNS

Chief Concern / Reason for Ultrasound: possible bladder mass recurrent UTIs for several months, recent culture showed E. coli infection Relevant Medical History and Physical Exam Findings: o. travels with pet regularly irregularity of dorsocranial aspect of bladder lining noted during cysto for most recent culture 12/8, started on enrofloxacin based on sensitivity results ucath placement for cytology to be performed today Recent Diagnostics: Relevant Laboratory Results / Abnormalities: bw in July no clinical significance Current medications (include full name, dosage, and frequency): carprofen for chronic osteoarthritis

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone. Anechoic urine was present with primarily minor nondependent particulate sediment. Multiple small polypoid lesions were visualized along the apical and dorsal urinary bladder wall. No evidence of mineral or calculi. The trigone and cystourethral junction were free of pathology. The urethra was normal in structure and tone to a depth of 4.0 cm.

The area of the uterine stump was free of pathology.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex. Mild areas of medullary mineral were visualized without evidence of pyelectasia. The left kidney measured 5.5 cm in length. The right kidney measured 5.9 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.52 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.66 cm width at the caudal pole.

Spleen

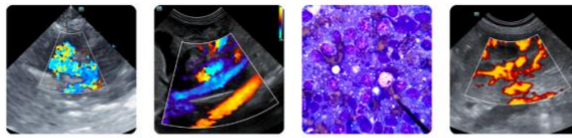
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute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

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was non distended in size with mild to moderate nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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.

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.

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

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 was evident.

Free Abdomen

Medial iliac lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of the lymph nodes measured 1.5 cm x 0.40 cm width. No peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Probable mild polypoid cystitis, minor nondependent urine sediment.
- Normal kidneys with mild right kidney medullary mineral- no evidence of pyelonephritis.

Secondary Findings

- Nonorganized gallbladder debris (non-mucocele).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Minor potential for emerging urinary bladder polypoid neoplastic criteria is not definitively excluded yet thought less likely. Correlation with cytology +/- screening BRAF assay is recommended. Assessment of the vulva and vaginal wall for evidence of structural pathology which may predispose to ascending infection may be considered. Continued empirical UTI protocol with clinical and sonographic monitoring of the urinary bladder for evidence of progressive polypoid changes would be appropriate.



Imaging performed by



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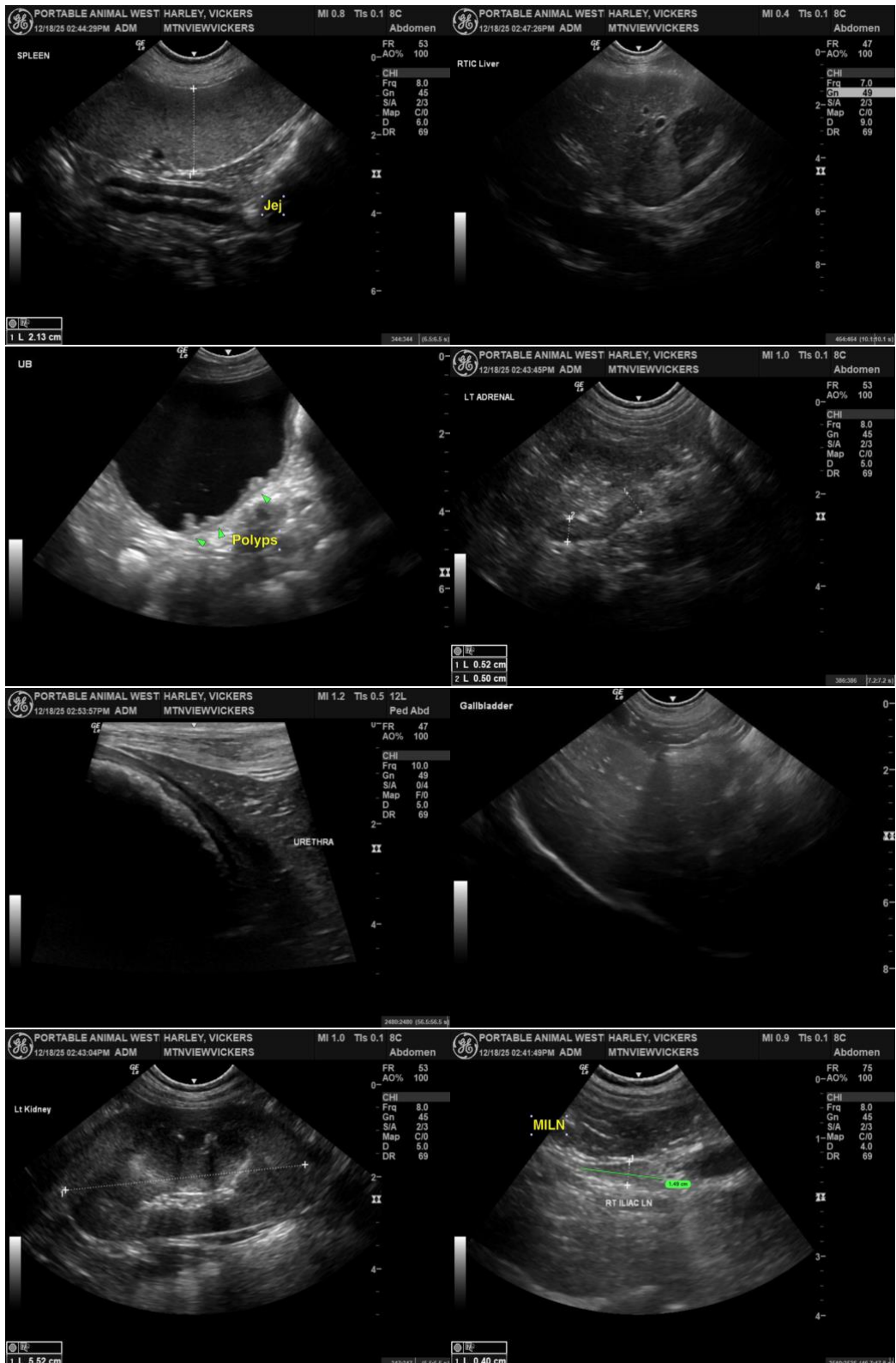
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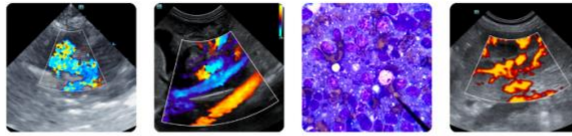
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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