



PATIENT

The submitted study contain images of the urinary tract only.

Zoe Mendonca

PRESENTING CLINICAL SIGNS

Chronic UTI with hx of positive culture

SPECIES

Canine

Current meds: Probiotic, phycox, gabapentin PRN

BREED

Pointer Mix

Abnormal PE/Chem/CBC/UA Results: Positive culture performed at rDVM, unknown organism, no bacteria seen in UA on 4/23 See attached UA from 4/28: Sample collected via free catch, High WBC and RBC, suspect presence of rods, USG 1020

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

FS

The urinary bladder presented uniformly thickened ventroapical to dorsoapical urinary bladder wall isoechoic to the adjacent normal urinary bladder wall. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. Urinary bladder wall thickness measured 0.8 cm. Apical urinary bladder wall measured 0.83 cm in width. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone to a depth of 4 cm. Anechoic urine was present in the lumen with mild particulate urine sediment, no mineral or calculi. The ureteral papillae were normal. The ureters were not visible which is normal.

AGE

8yr

WEIGHT

66lb

Normal size and margination were 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 with no evidence of pelvic dilation. The left kidney measured 6.9 cm in length. The right kidney measured 6.5 cm in length.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Cystitis pattern with urine sediment
- Normal bilateral kidneys

IMAGING PERFORMED BY

Jasmine Palacios

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Rivers Edge Pet
Medical Center

A urine C/S on sterile urine sample recommended if not done. Given evidence of cystitis and based on urine C/S results, a higher dose, shorter frequency antibiotic regimen such as Clavimox or Enrofloxacin 20 mg/kg PO SID for 3-5 days may prove more effective if recurrent UTI. No overt suspicion of neoplastic criteria which is considered unlikely. Concurrent BRAF assay, if possible, could be considered for further clarification. Assessment of the vulva and vaginal vault for evidence of structural abnormality which may predispose to ascending infection is recommended. No evidence of pyelonephritis.

REFERRING VET

Dr David Grey

INVOICE

24667

DATE

04/28/2026



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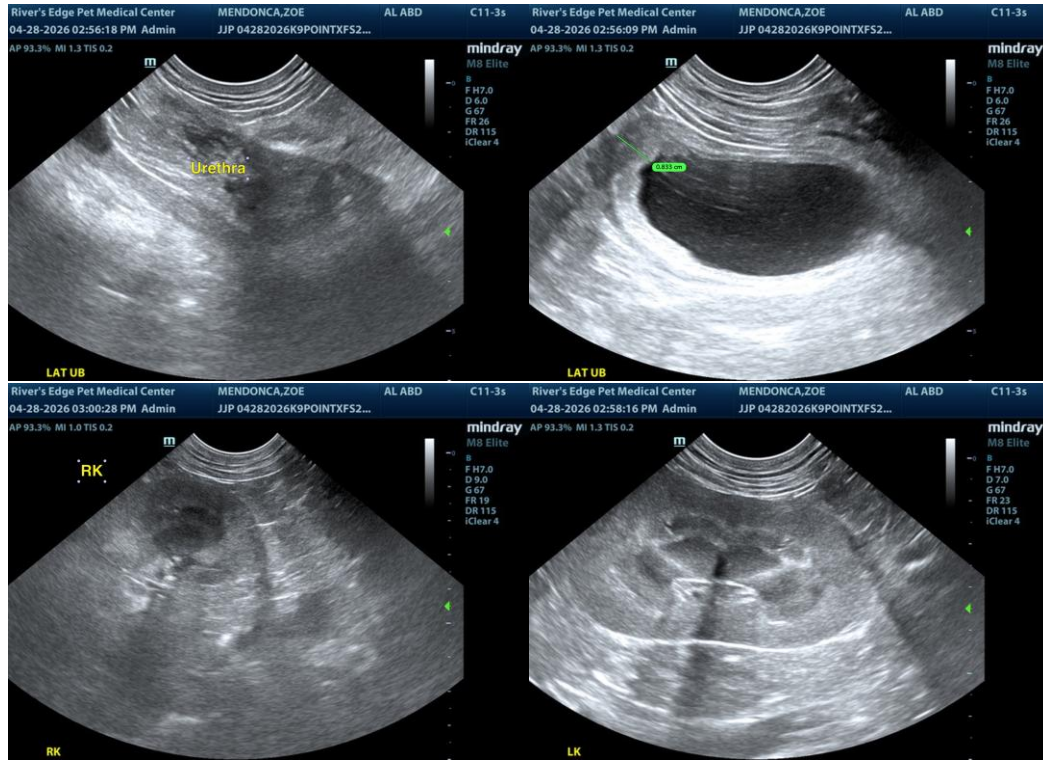
FS

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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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Jasmine Palacios

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

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