

**PATIENT**

Tyra McAllister

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

FS

**AGE**

9 years

**WEIGHT**

22.3 lb

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP (Canine  
and Feline)**IMAGING  
PERFORMED BY**

Rachel Runnells, RVT

**HOSPITAL NAME**

SVS Imaging KC

**REFERRING VET**

Dr. Cason

**INVOICE**

13619

**DATE**

4/6/22

**PRESENTING CLINICAL SIGNS**

Urinating small amounts, long history of recurrent urinary tract infections that seemingly clear up but recur a few weeks-months later. Most recent episode 3/17/22. Previous UTI-like symptoms on 2/28/22, 10/12/21, 5/28/21, 2/26/21, 3/6/20, previous incidents reported by owner prior to becoming a client here. Pt does have a bit of a hooded vulva.

Abnormal PE/Chem/CBC/UA Results: UA from 3/17/22: USG 1.031, pH 8.0, WBCs >50/hpf, RBC 4/hpf, no bacteria detected, otherwise unremarkable. Radiograph of bladder on 2/26/21 shows no evidence of uroliths.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. The visible proximal urethra to a depth of 3.0 cm exhibited normal structure and tone without evidence of pathology or urine retention. Anechoic urine was present in the lumen with no uroliths, sediment, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic urinary bladder wall changes was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were 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 minor loss of corticomedullary symmetry and definition expected for the age of the patient. Pinpoint medullary mineral was present. No evidence of pyelectasia was present. The left kidney measured 4.7 cm in length. The right kidney measured 5.3 cm in length.

**Adrenal Glands**

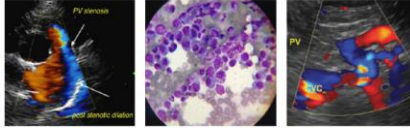
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.48 cm width at the caudal pole and 0.51 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.52 cm width at the caudal pole and 0.66 cm width at the cranial 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 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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**PATIENT**

Tyra McAllister

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

FS

**AGE**

9 years

**WEIGHT**

22.3 lb

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP (Canine  
and Feline)**IMAGING  
PERFORMED BY**

Rachel Runnells, RVT

**HOSPITAL NAME**

SVS Imaging KC

**REFERRING VET**

Dr. Cason

**INVOICE**

13619

**DATE**

4/6/22

***Gastrointestinal***

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 were evident.

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

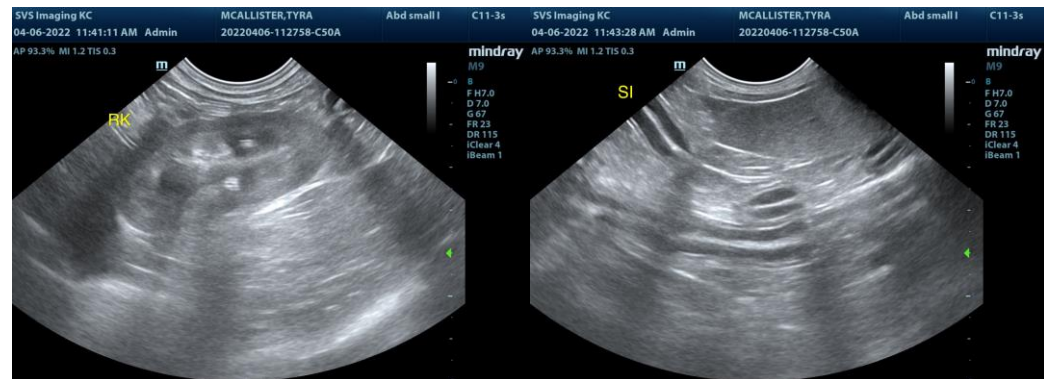
**ULTRASONOGRAPHIC FINDINGS**

- Early to mild age-related kidneys - no evidence of pyelonephritis
- Sonographically unremarkable urinary bladder and visible proximal urethra

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No overt evidence of structural upper or lower urinary tract pathology as an obvious cause of recurrent urinary tract infection.

Given the pollakiuria in this patient, potential for sonographically unremarkable to low-grade cystitis or urethritis could be present. Urine culture and sensitivity on a sterile urine sample is suggested to assess for underlying Infection. If recurrent documented infection, assessment of vulva or vaginal vault for evidence of structural abnormalities which may predispose to ascending Infection is recommended.





**PATIENT**

Tyra McAllister

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

FS

**AGE**

9 years

**WEIGHT**

22.3 lb

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Rachel Runnells, RVT

**HOSPITAL NAME**

SVS Imaging KC

**REFERRING VET**

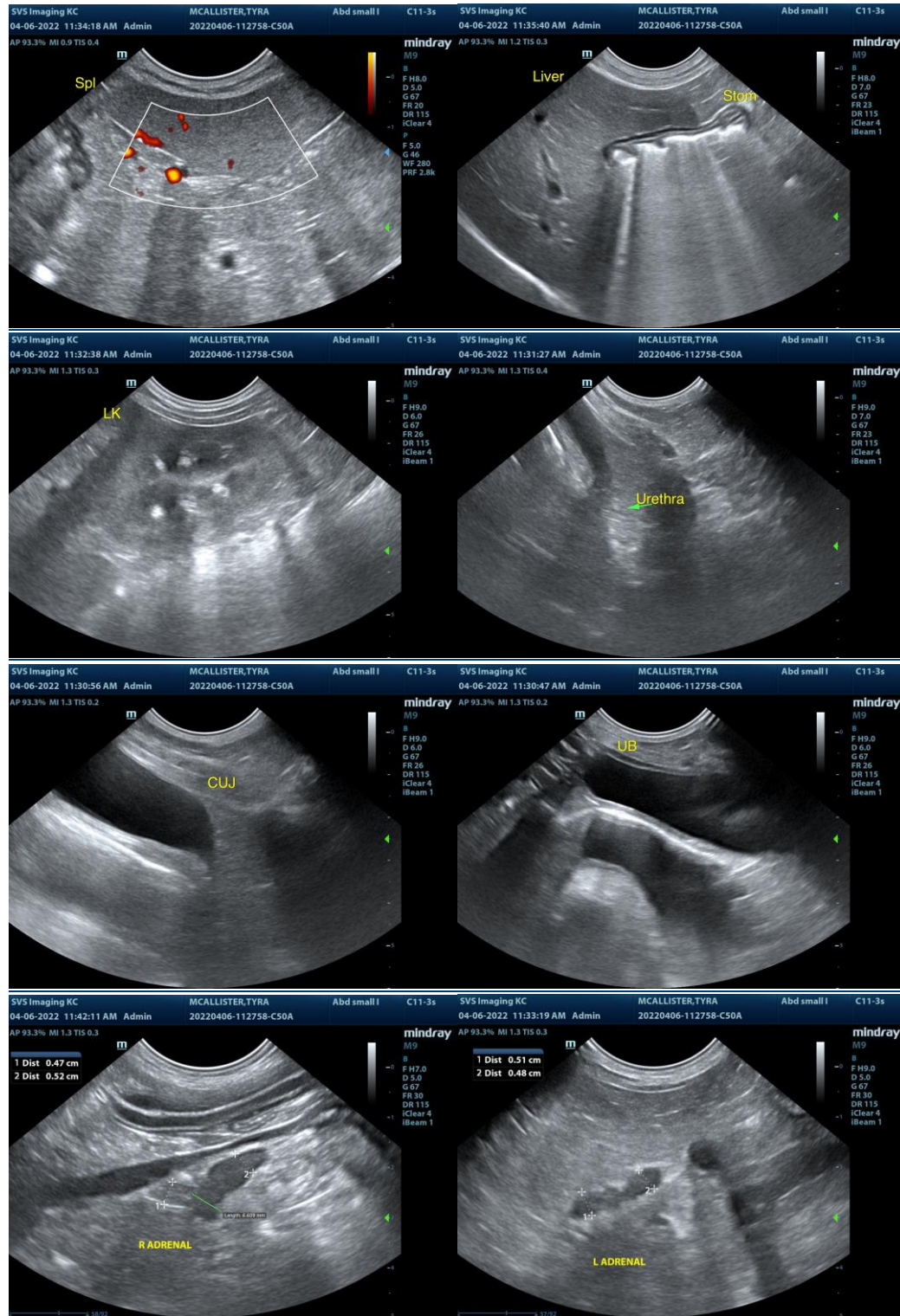
Dr. Cason

**INVOICE**

13619

**DATE**

4/6/22



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.

**IMAGING PERFORMED BY**

SVS Mobile Imaging KC 816-401-5010  
svsimagingkc@gmail.com



EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

**PATIENT**

Tyra McAllister

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.

**SPECIES**

Canine

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

**BREED**

Dachshund

**SEX**

FS

**AGE**

9 years

**WEIGHT**

22.3 lb

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Rachel Runnells, RVT

**HOSPITAL NAME**

SVS Imaging KC

**REFERRING VET**

Dr. Cason

**INVOICE**

13619

**DATE**

4/6/22