

## PATIENT

Skye Rau

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Spayed Female

## AGE

8 Years

## WEIGHT

78 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Darice Ackerson-  
Gordon

## HOSPITAL NAME

Clover Croft  
Veterinary Hospital

## REFERRING VET

Dr. David Harris

## INVOICE

16356

## DATE

05/18/26

## PRESENTING CLINICAL SIGNS

PU/PD hooded vulva

## LIMITED ULTRASONOGRAPHIC EXAMINATION

The submitted study contained seven still images and nine videos of the urinary bladder only.

### Urinary System

The urinary bladder presented uniformly thickened wall isoechoic to the adjacent normal urinary bladder wall primarily visualized in the ventroapical to dorsoapical urinary bladder. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour with pinpoint to focal areas of apical lumen surface mineral. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. Anechoic urine was present in the lumen with minor dependent non-mineralized urine sediment. The ureteral papillae were normal. The ureters were not visible which is normal. The dorsoapical wall measured 0.84 cm wall width. the trigone and cystourethral junction were free of pathology. The visible proximal urethra was visible to a depth of 3.0 cm without evidence of urine dilation.

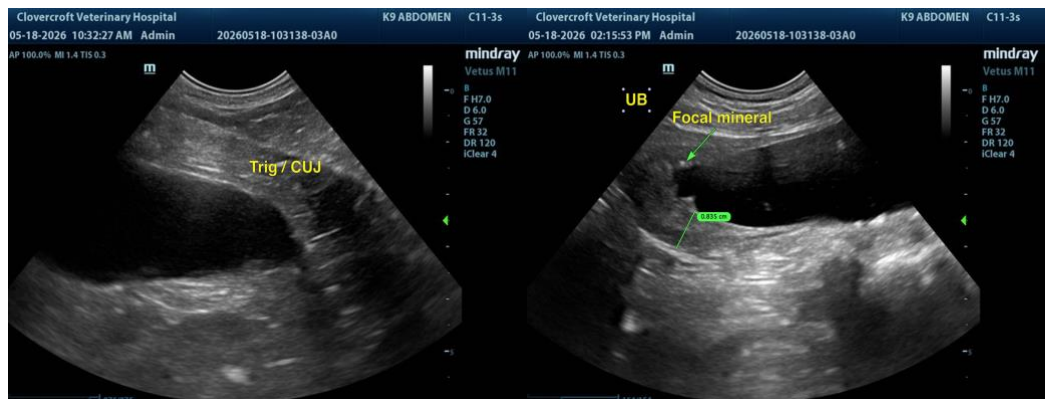
## ULTRASONOGRAPHIC FINDINGS

- Apical cystitis pattern with pinpoint to focal likely adhered lumen mineral and mild urine sediment.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recheck urinalysis and culture/sensitivity on sterile urine sample is suggested if not recently done. If documented current or recurrent UTI, ascending infection owing to vulva abnormality may be suspected. Apical neoplastic criteria such as transitional cell carcinoma are considered unlikely given pattern of wall thickening. If possible, a screening BRAF assay is suggested for further clarification.

Given PU/PD, correlation with full lab work and consideration for full abdominal ultrasound to assess liver and adrenal glands is suggested. Empirical therapy for UTI/cystitis is indicated with as needed clinical and sonographic monitoring.



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.

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

[info@SonoPath.com](mailto:info@SonoPath.com)