



PATIENT

Tally Wooten

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

9 years 11 months

WEIGHT

16 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Crook -
SDEP Certified
Clinical Sonographer

HOSPITAL NAME

Rivers Edge PMC

REFERRING VET

Dr. David Gray

INVOICE

17406

DATE

7/26/23

PRESENTING CLINICAL SIGNS

History of chronic UTI issues, on urinary food - not currently on any medications

ULTRASONOGRAPHIC EXAMINATION OF THE URINARY SYSTEM

The urinary bladder presented uniformly thickened 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. The ventral apical urinary bladder wall thickness measured 0.48 cm wall 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 3.0 cm. Nonobstructive urethral lumen mineral extending to a depth of ~2.0 cm was noted. Mild anechoic urine was present in the lumen with dependent to non-dependent lumen mineral with adhered mineral along the apical luminal surface. No overt urinary bladder tumors were visualized. The ureteral papillae were normal. The ureters were not visible which is normal.

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

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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint to minor areas of medullary mineral were noted. No pyelectasia was noted. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.

ULTRASONOGRAPHIC FINDINGS

- Chronic cystitis with dependent to non-dependent adhered lumen mineral
- Structurally unremarkable proximal urethra with nonobstructive urethral lumen mineral
- Mild age-related kidneys with pinpoint to minor medullary mineral - no evidence of pyelonephritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recheck urine C/S on a sterile urine sample, if not recently done, is recommended. Potential for chronic bacterial cystitis may be a primary issue in this patient. No evidence of lower urinary tract neoplastic criteria or post urinary obstruction was noted.

Ideally based on urine C/S results, a higher dose/shorter frequency antibiotic regimen, given evidence of cystitis, i.e., Clavamox or Enrofloxacin, 20 mg/kg PO SID for 4-5 days with urinary support including dietary therapy may prove beneficial. Urinary bladder wall biopsy for histopathology, tissue C/S, and urethra / urinary bladder lumen flush may ultimately be a consideration in this patient.



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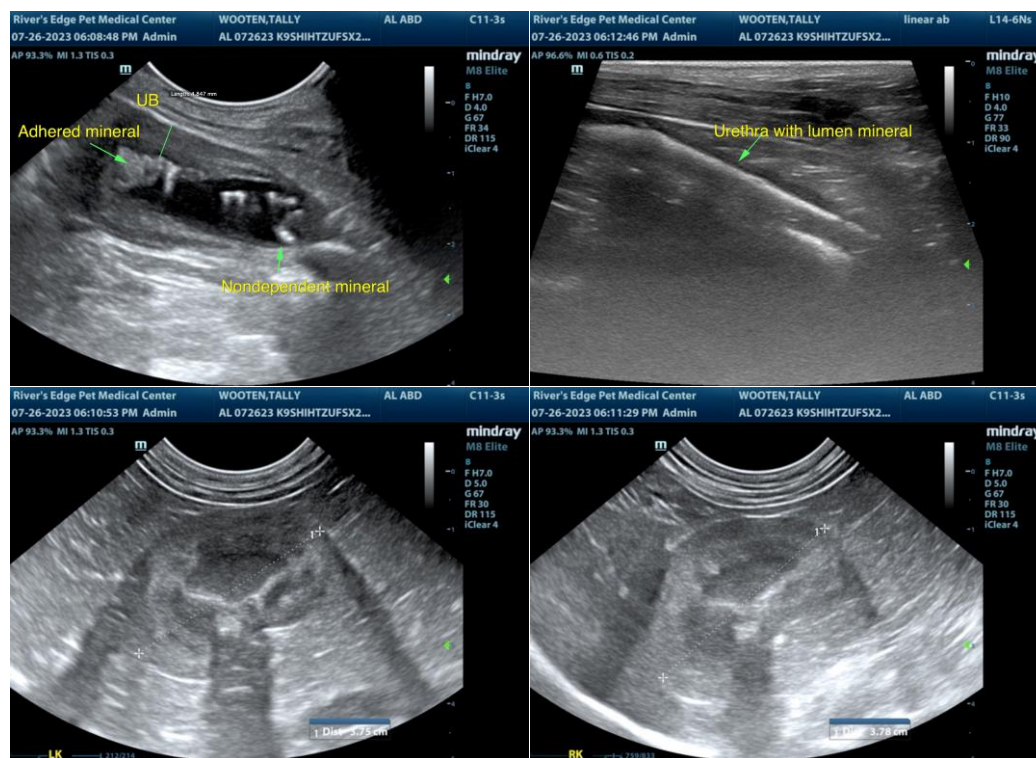
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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