



PATIENT	PRESENTING CLINICAL SIGNS
Beatrix PMRF Rescue	Initially presented for OVH. During surgery the DVM removed the right ovary . Upon reaching the uterine bifurcation they came across a large fluid filled tubular structure that they were not able to track to an ovary. The left uterine horn was not visible. Unknown if clinical signs are present as this puppy has just gone to foster care, but is seemingly clinically normal.
SPECIES	
Canine	Abnormal PE/Chem/CBC/UA Results: Labs pending
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Mixed	Urinary System
SEX	The urinary bladder was normal in size and tone with normal appearing bladder walls. Anechoic urine was present in the lumen with no uroliths or sediment.
Female	Normal size and margination were present in the right kidney. A normal 1:3 cortex / medulla ratio and intact renal architecture was present. No evidence of pyelectasia or hydronephrosis. The right kidney was enlarged in size measuring 6.9 cm in length.
AGE	A large fluid filled structure was present in the area of the left kidney within the caudal abdomen cranial to the urinary bladder. The structure contained anechoic fluid measuring ~ 4.0 cm in diameter. The structure appeared to extend into the area of the ureteral papilla. Subjective dilated tortuous distal left ureter at the level of the ureteral papilla was present.
9wk	The area of the aortic trifurcation was free of pathology.
WEIGHT	Remaining uterus and left ovary not definitively visualized.
5kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.25 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 0.42 cm width at the caudal pole and 0.55 cm width at the cranial pole.
IMAGING PERFORMED BY	Spleen
Dr Sarah Barthelemy	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.
HOSPITAL NAME	Liver/Gallbladder
Silverado Veterinary Hospital	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. Normal vascular volume. 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.
REFERRING VET	Gastrointestinal
Dr Balc	
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DATE	
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PATIENT	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.
Beatrix PMRF Rescue	
SPECIES	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.
Canine	Normal visible colon wall layers were present with apparent formed feces in lumen.
BREED	Pancreas
Mixed	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.
SEX	Free Abdomen
Female	Intermittent mildly prominent to enlarged mesenteric 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 measured 1.8 cm x 0.75 cm.
AGE	Potential very scant pockets of peritoneal free fluid.
9wk	ULTRASONOGRAPHIC FINDINGS
WEIGHT	<ul style="list-style-type: none"> • Large fluid filled structure cranial to the urinary bladder extending into the area of the left kidney. • Probable dilated to tortuous left ureter at the level of the ureteral papilla. • Non-distended urinary bladder. • Intact right kidney exhibiting subjective compensatory hypertrophy. • Intermittent subjective benign/reactive mesenteric lymph nodes-probable immunologic immaturity.
5kg	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The large fluid filled structure is strongly suggestive of strictured distal left ureter with secondary severe left hydroureter and left hydronephrosis. This is suspected to be a congenital issue given patient age with potential subjective thickened distal left ureter potentially in the area of the left ureteral papilla. This could indicate left ureter ectopy. Potential for left ovarian or uterine hypoplasia cannot be excluded. Abdominal CT with contrast is strongly suggested, if possible, for further clarification and surgical planning.
IMAGING PERFORMED BY	If further imaging is not possible, laparotomy with gross inspection of the distal left ureter at the level of the urinary bladder with resection of any distal left ureter or ureteral papilla pathology causing stricture obstruction as well as removal of dilated left ureter, left kidney and remaining ovariouterine tissue is recommended.
Dr Sarah Barthelemy	
HOSPITAL NAME	
Silverado Veterinary Hospital	
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PATIENT

Beatrix PMRF Rescue

SPECIES

Canine

BREED

Mixed

SEX

Female

AGE

9wk

WEIGHT

5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sarah Barthelemy

HOSPITAL NAME

Silverado Veterinary
Hospital

REFERRING VET

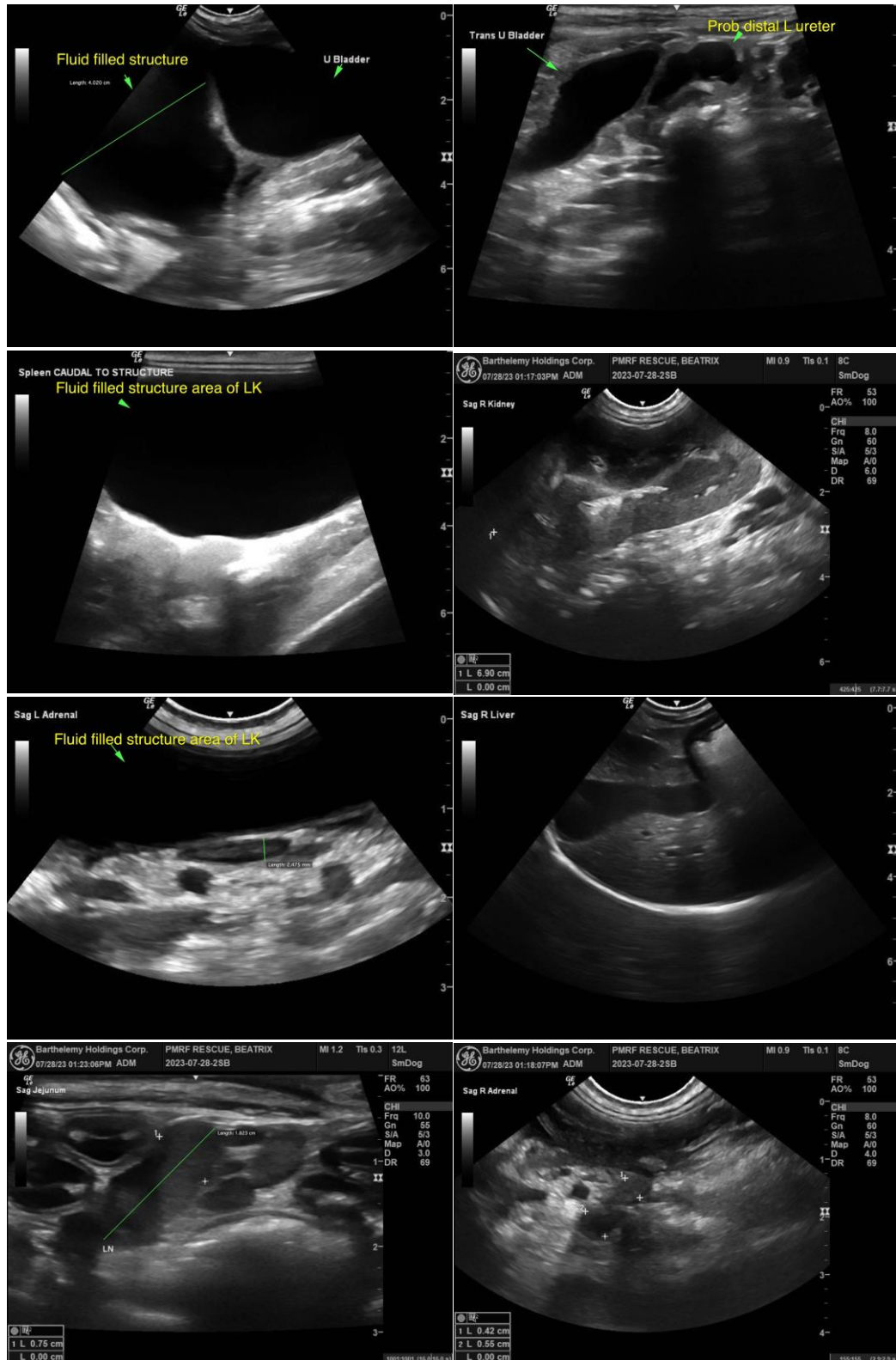
Dr Balc

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PATIENT

Beatrix PMRF Rescue

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.

SPECIES

Canine

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.

BREED

Mixed

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

SEX

Female

AGE

9wk

WEIGHT

5kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr Sarah Barthelemy

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