



PATIENT

Champ Biccum

SPECIES

Canine

BREED

Retriever Mix

SEX

M/N

AGE

15 yrs

WEIGHT

75.40

INTERPRETED BY

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

IMAGING PERFORMED BY

Andrew Beachy

HOSPITAL NAME

Willamette
Veterinary Hospital

REFERRING VET

Andrew Beachy

INVOICE

14582

DATE

8/11/22

PRESENTING CLINICAL SIGNS

-Rectal wnl -Urinating only blood for 2 months -Mass located in bladder -No new urgency to have to urinate -Previously treated with antibiotics, but this was not helpful. -Grade 2/6 heart murmur
Abnormal PE/Chem/CBC/UA Results: No BW done.

ULTRASONOGRAPHIC EXAMINATION OF THE URINARY SYSTEM

Urinary System

The urinary bladder was normal in size and tone. A sessile-based urinary bladder mass originating from the mid ventral urinary bladder wall extending into the urinary bladder lumen was present. The mass exhibited nonhomogeneous pinpoint hyperechoic parenchyma with potential pinpoint areas of mineralization. The mass measured approximately 3.6 cm x 2.6 cm. Regional ventral urinary bladder wall adjacent to the mass appeared to be mildly thickened exhibiting asymmetrical luminal surface contour. The area of the trigone and cystourethral junction were sonographically normal extending into the visible proximal urethra, which exhibited subjective structure and tone to a depth of 3.0 cm.

The area of the residual prostate was sonographically unremarkable measuring 0.75 cm in diameter.

No overt evidence of pathology was noted in the area of the iliac trifurcation including no obvious or visualized medial Iliac or sublumbar lymphadenopathy.

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 pyelectasia or hydronephrosis was present. Pinpoint areas of medullary mineral were noted. The left kidney measured 6.6 cm in length. The right kidney measured 6.8 cm in length.

ULTRASONOGRAPHIC FINDINGS

- Sessile-based urinary bladder mass
- Bilateral mild chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder mass is most likely consistent with transitional cell carcinoma.

Traumatic catheterization could be considered for further assessment +/- screening BRAF Assay or cytospin cytology of a free catch urine sample to assess for atypical transitional cells.

No evidence of left or right ureteral papillae involvement was evident. No obvious evidence of regional metastatic disease was present.

An oncology consult could be considered pending additional diagnostics. Empirically, Piroxicam trial could be considered. Urine C/S, ideally and if possible, on a sterile urine sample to rule out underlying concurrent infection, is suggested.



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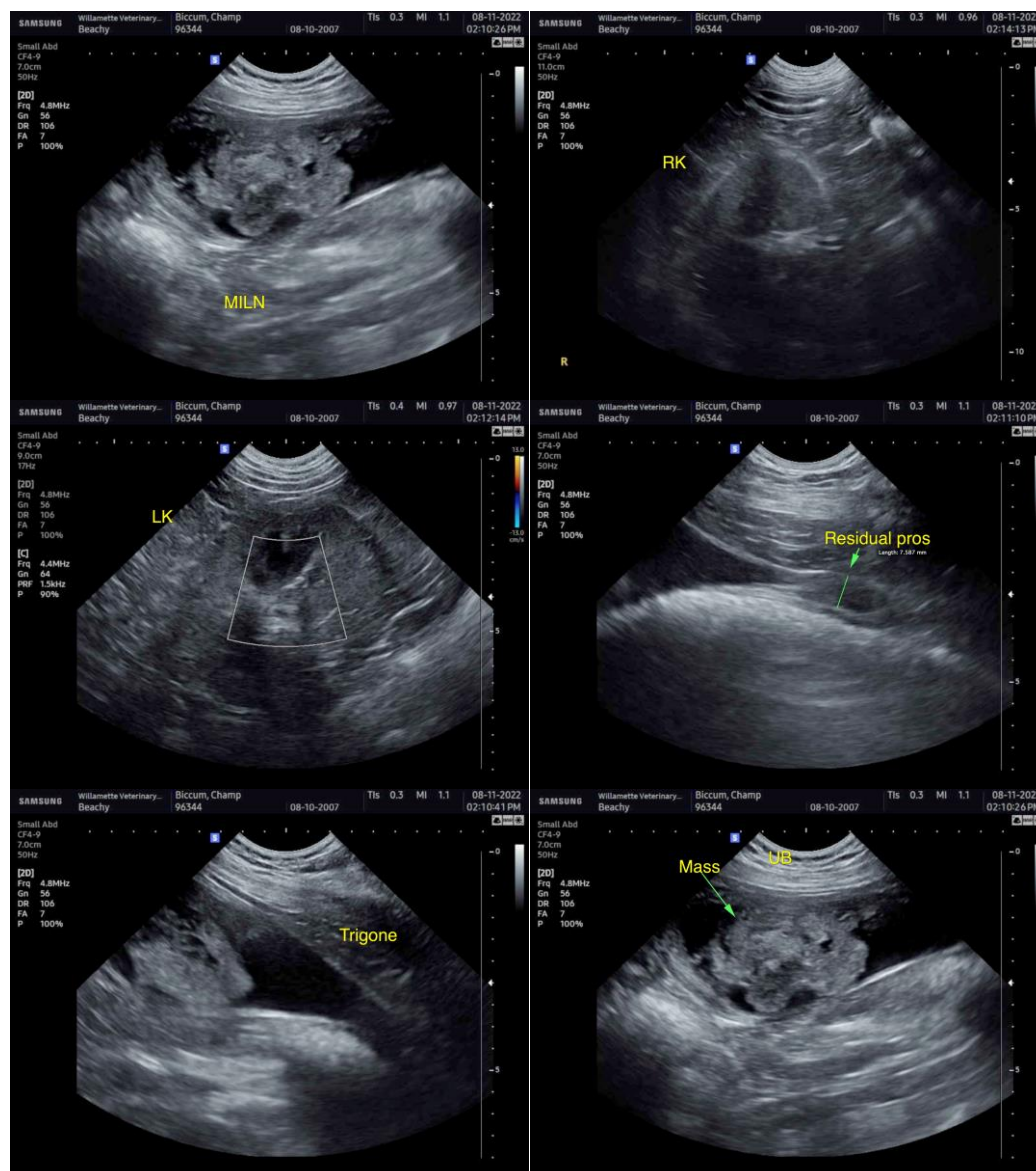
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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