



PATIENT

Kona Surdyka

SPECIES

Canine

BREED

Boxer

SEX

FS

AGE

2 years, 9 months

WEIGHT

70.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller, RDMA

HOSPITAL NAME

Mildand Park VH

REFERRING VET

Dr. Shokoff

INVOICE

14829

DATE

8/16/23

PRESENTING CLINICAL SIGNS

Dripping urine when ambulating. Patient was spayed at a spay clinic and developed complications afterward w/ significant mass effect at uterine stump > resolved w/ time and antibiotic / anti-inflammatory (unsure if related to MCT)

Abnormal PE/Chem/CBC/UA Results: NSF

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone with generalized sonographically unremarkable urinary bladder wall without evidence of inflammatory criteria. There was no evidence of urinary bladder tumors. Anechoic urine was present in the lumen with no evidence of lumen sediment, mineral, or calculi. There was no overt pathology noted at the level of the trigone and cystourethral junction extending into overtly normal visualized proximal urethra exhibiting normal urethral structure and tone. Subjective mildly dilated distal ureter was noted at the level of the ureteral papilla measuring 0.29 cm in diameter.

The visualized uterine remnant was overtly normal in sonographic appearance and expected size without evidence of pathology or uterine remnant lumen fluid accumulation measuring 0.54 cm diameter.

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 and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation, pyelectasia, or hydronephrosis. The left kidney measured 7.3 cm in length. The right kidney measured 7.5 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 3.3 cm length x 0.65 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 2.7 cm length x 0.61 cm width at the caudal 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

Kona Surdyka

SPECIES

Canine

BREED

Boxer

SEX

FS

AGE

2 years, 9 months

WEIGHT

70.2 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Miller, RDMA

HOSPITAL NAME

Mildand Park VH

REFERRING VET

Dr. Shokoff

INVOICE

14829

DATE

8/16/23

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

- Nondistended urinary bladder exhibiting normal tone
- Overtly normal visualized proximal urethra
- Subjective mild distal ureter dilation at the level of the ureteral papilla
- Normal bilateral kidneys
- Sonographically unremarkable uterine remnant

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A definitive or obvious structural or congenital lower urinary tract defect was not obvious with subjective mild distal ureter dilation at the level of the ureteral papilla of unclear clinical significance. The potential for a small sonographically unevident structural or congenital lower urinary tract defect as a contributing factor to the intermittent incontinence cannot be definitively excluded.

Gross assessment of the vulva and vaginal vault for evidence of urine pooling or distal urethral / vaginal vault structural abnormality is recommended. Vaginoscopy / cystoscopy and/or Gold Standard CT with contrast to assess for or rule out nonobvious structural abnormality is recommended. Screening urine C/S on a sterile urine sample may be considered to rule out underlying infection, although there is no evidence of urinary bladder sediment.



PATIENT

Kona Surdyka

SPECIES

Canine

BREED

Boxer

SEX

FS

AGE

2 years, 9 months

WEIGHT

70.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller, RDMA

HOSPITAL NAME

Mildand Park VH

REFERRING VET

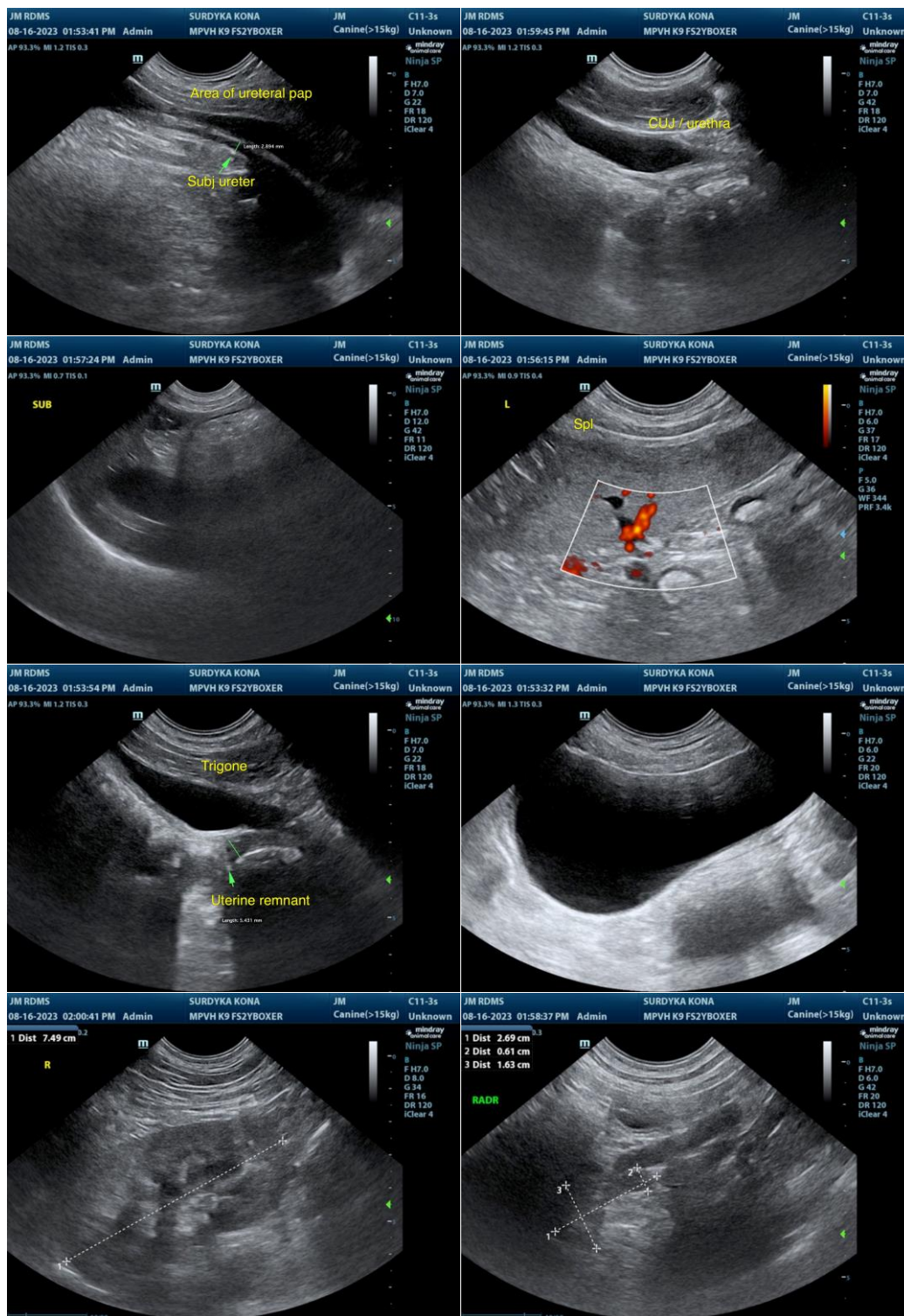
Dr. Shokoff

INVOICE

14829

DATE

8/16/23





PATIENT

Kona Surdyka

SPECIES

Canine

BREED

Boxer

SEX

FS

AGE

2 years, 9 months

WEIGHT

70.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller, RDMA

HOSPITAL NAME

Mildand Park VH

REFERRING VET

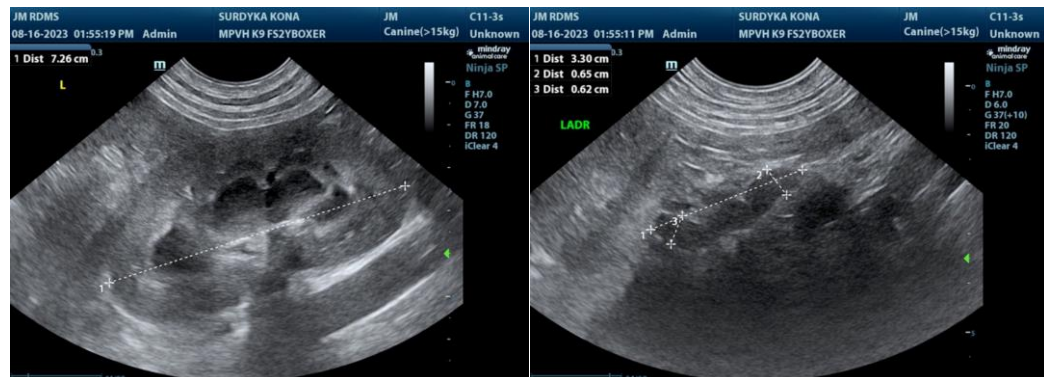
Dr. Shokoff

INVOICE

14829

DATE

8/16/23



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