



**PATIENT**

Rave Pazzno

**PRESENTING CLINICAL SIGNS**

–Recurrent UTI, mammary gland carcinoma. Currently on Baytril.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

**BREED**

Bernese Mountain Dog

The uterine stump was visualized and sonographically unremarkable, measuring 0.63 cm in diameter. No evidence of fluid accumulation or uterine stump neoplasia.

**SEX**

Spayed Female

No evidence of pathology Including no evidence of lymphadenopathy in the area of the iliac trifurcation or sublumbar space.

**AGE**

7 years

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 overt pyelonephritis was noted. The left kidney measured 7.4 cm in length. The right kidney measured 7.4 cm in length.

**WEIGHT**

83 lbs.

**Adrenal Glands**

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.63 cm width at the caudal pole and 0.63 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.88 cm width at the caudal pole.

**IMAGING PERFORMED BY**

Crystal Hill

**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.

**HOSPITAL NAME**

Limestone Valley AH

**REFERRING VET**

Dr. El-Ghazewsi

**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.

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**Gastrointestinal**

**DATE**

9/7/21

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 gastric body wall width measured 0.54 cm.



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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. The jejunum wall width measured 0.44 cm.

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Canine

Normal visible colon wall layers were present with apparent formed feces in lumen.

**BREED**

Bernese Mountain Dog

**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**

**SEX**

Spayed Female

No evidence of omental lymphadenopathy, masses, or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

7 years

**Primary Findings**

- Sonographically unremarkable abdomen

**WEIGHT**

83 lbs.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No overt evidence of upper or lower urinary tract pathology as an obvious cause of recurrent UTI. Assessment of the vulva and vaginal vault for evidence of structural pathology, which may predispose to ascending UTI, may be considered.

**INTERPRETED BY**

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Ideally, based on urine culture and sensitivity results on a sterile urine sample, a higher dose of antibiotic for shorter frequency i.e., Clavamox or Enrofloxacin 20 mg/kg PO SID for 3-5 days may prove beneficial if recurrent documented infection.

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No evidence of peritoneal or retroperitoneal metastasis from mammary carcinoma.

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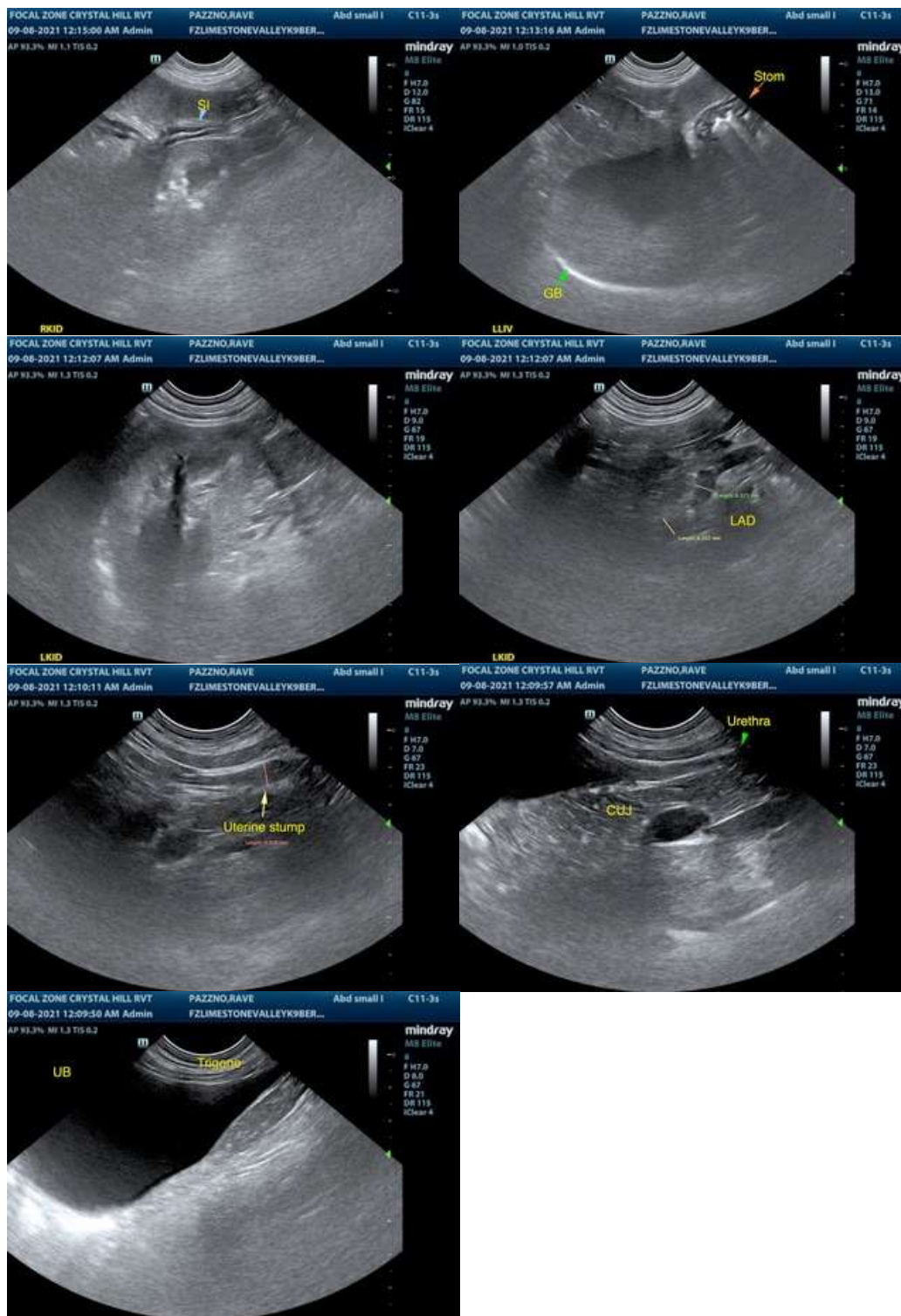
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**referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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**