



PATIENT

Roxanne Lynne

SPECIES

Canine

BREED

English Bulldog

PRESENTING CLINICAL SIGNS

Subjective Presented as US from Bakken Vet Williston, Long time history of urinary issues, treated with FQ. See past record. US with Dr Baker had suspected bladder mass. Now having D+ and worsening signs Objective QAR. E/E clear. Vulva- mild hooding, no appreciable vulva dermatitis. Curled tail, minimal tail fold concerns BCS 6/9. Brachycephalic US showed large mass at area of trigone but not entirely clear; appeared external to the bladder wall. Changes to the left kidney, ureter dilation, renal pelvis dilation Can palpate a baseball sized hard firm mass in the caudal abdomen near bladder. FNA- degenerate WBCS Assessment Abdominal mass- RO bladder origin vs other Plan Contrast CT available. Pending consult to evaluate for additional options. RO bladder origin vs external and if surgical intervention is possible. Concern of ureter involvement and changes to L kidney

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

FS

AGE

6yr

WEIGHT

61lb

Urinary System

The urinary bladder exhibited normal size and tone with subjective uniform mildly prominent dorsal, apical and ventral bladder walls with maintained wall integrity and no evidence of luminal masses. The proximal urethra was indistinctly visualized potentially owing to displacement without obvious evidence of proximal urethral urine dilation or retention. Anechoic urine was present in the lumen with potential for minor particulate sediment.

Normal size and margination were present in the left kidney. Moderate to severe left kidney hydronephrosis was present with concurrent proximal left hydroureter. No overt evidence of discernable left kidney medullary parenchyma with only cortex visualized.

Normal size and margination were present in the right kidney. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortex were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. Mild pyelectasia was present in the right kidney. No evidence of right kidney hydronephrosis/hydroureter.

The left kidney measured 7.0 cm in length. The right kidney measured 7.0 cm in length.

Adrenal Glands

The left and right adrenal glands were not definitively visualized.

Spleen

The spleen was not definitively visualized.

Liver

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.

Gastrointestinal

The visualized stomach presented intact wall layering with potential for retained non-shadowing ingesta/chyme.

The small intestine presented intact wall layering with subjective 1:3 muscularis/mucosa ratio. No overt evidence of ileus, obstruction or foreign material.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Evoniuk

HOSPITAL NAME

State Avenue
Veterinary Clinic

REFERRING VET

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The visualized colon exhibited intact and sonographically normal wall layering.

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Pancreas

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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.

Canine

Free Abdomen

BREED

No overt peritoneal effusion was present although minor effusion is possible.

English Bulldog

A large non-homogeneous irregular mass was present primarily dorsal to caudodorsal to the urinary bladder and adjacent to the distal descending colon/colorectum measuring ~ 10-11 cm in diameter. Areas of intra mass fluid accumulation exhibiting mild echogenic changes were present with associated regional hyperechoic tissue/mesentery.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

Primary

6yr

- Overtly normal urinary bladder containing mild particulate sediment
- Undifferentiated moderately sized non-homogeneous mass dorsal/caudodorsal to the urinary bladder with associated regional reactivity
- Moderate to severe left kidney hydronephrosis with left hydroureter
- Mild right kidney pyelectasia

WEIGHT

61lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

This study confirms the presence of a large undifferentiated mass in the area of the urinary bladder/iliac trifurcation sublumbar space and distal descending colon. Neoplastic criteria is suspected with potential concurrent areas of intra-mass hemorrhage, necrosis or abscessation. Urinary bladder, colon, lymphatic or uterine remnant origin possible. The mass is likely obstructing the left ureter flow resulting in left hydroureter and hydronephrosis. Assuming normal clotting status and using a 25g needle a mass FNA is recommended for screening cytology +/- intra mass fluid analysis and C/S. Abdominal CT for further clarification is recommended if possible. Three view chest radiographs suggested if not done to assess for thoracic pathology.

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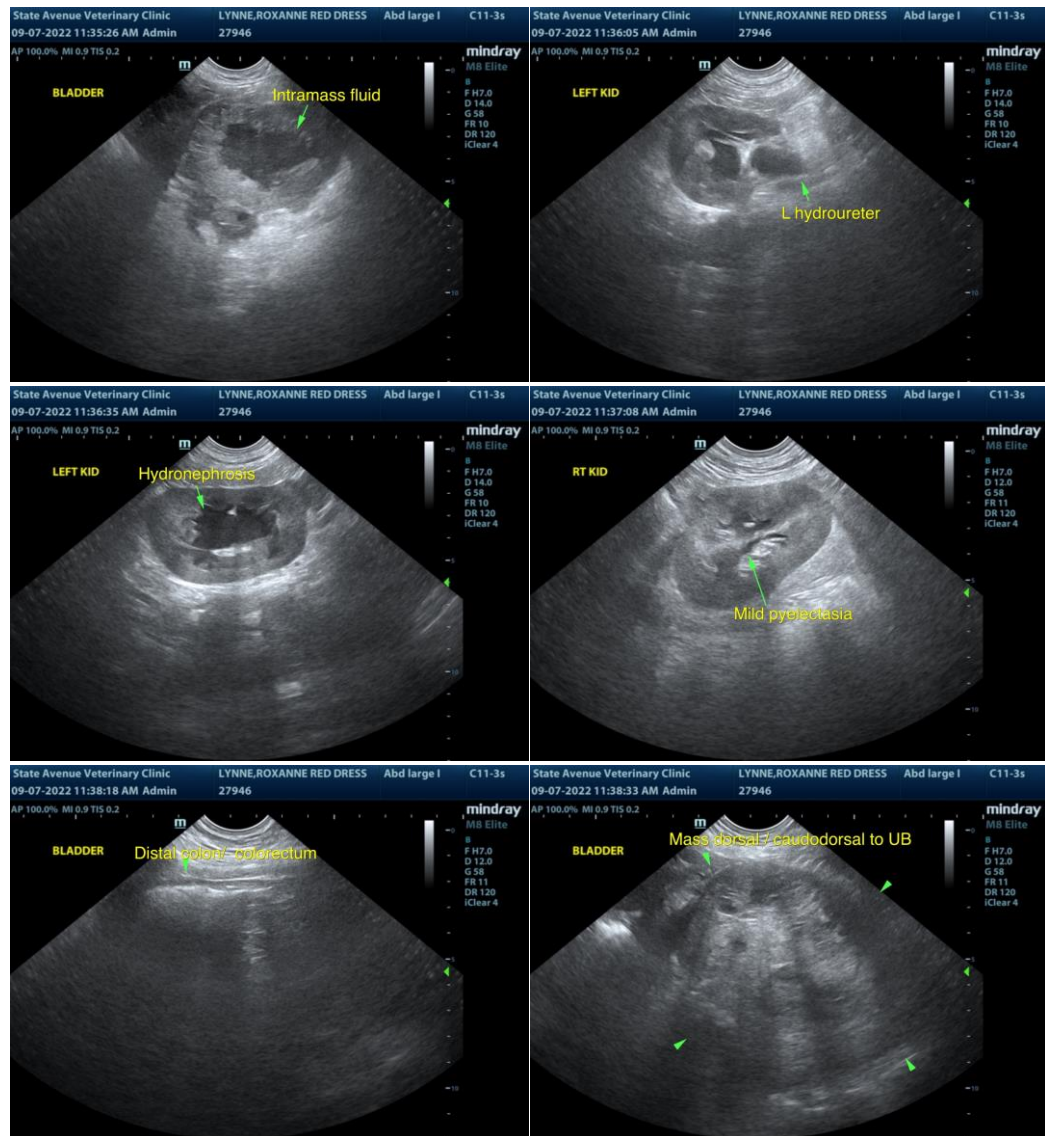
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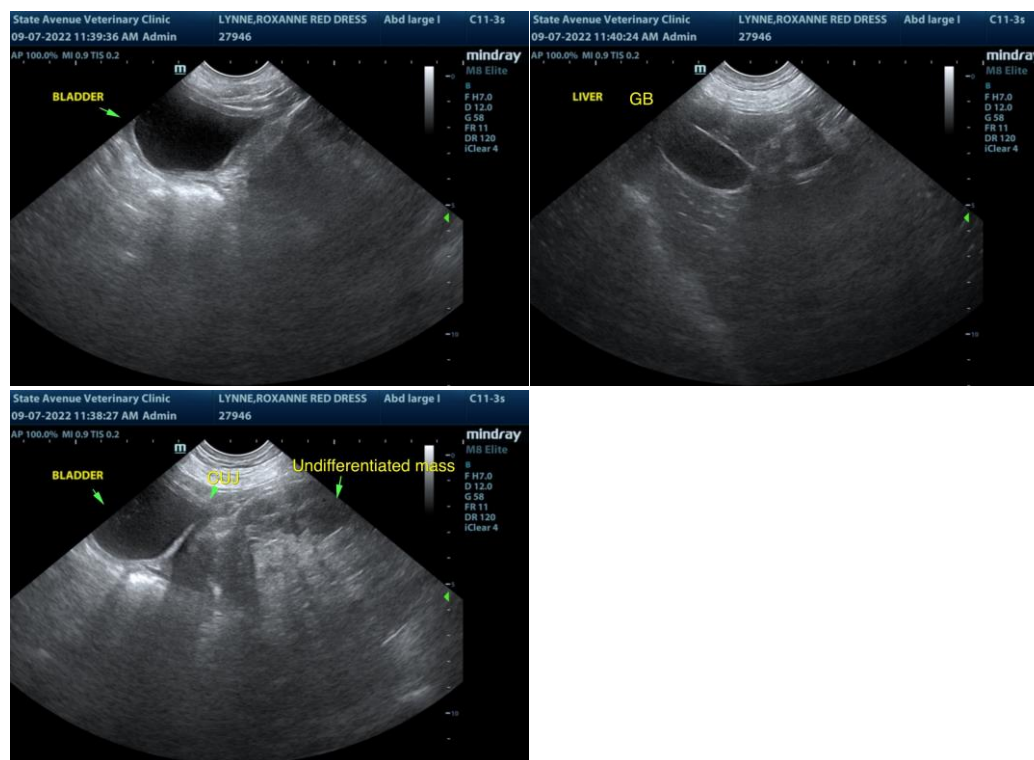
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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