



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Cholo Silva Reason for Visit: URINATING IN HOUSE History: O HAD A BABY (1 YEAR OLD, P IS URINATING IN THE HOUSE, P IS ABLE TO HOLD BLADDER @ NIGHT, O WANTS TO RULE OUT UTI, P HAS A GOOD STREAM, O CLEANS P FACE AND REAR, HAS TEAR STAINING ON FACE

**SPECIES** Canine Abnormal PE/Chem/CBC/UA Results: Hydration: Adequate Mentation: BAR EENT: OU clear. AU clear, no debris. No cough on tracheal palpation. Oral cavity: Mild dental tartar Lymph Nodes: Submandibular, prescapular and popliteal lymph nodes normal size, shape and consistency Skin: Nasal facial folds--dermatitis with erosion especially right facial folds; collarettes ventral abdomen with erythema CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. Abd/GI: Soft, non-painful, no fluid wave, no palpable masses or organomegaly. Uro/Perineum: urethral prolapse distal 1cm of urethra, no bleeding. mucosa moderately edematous. Musculoskeletal: BCS = 8/9. Ambulatory x 4, normal gait, history of bilateral cruciate ligament rupture Neurological: Alert and appropriate. No deficits noted. Diagnostic Testing: urinalysis==USG=1.044, quiet sediment, no proteinuria, pH=5.0 Radiographs caudal abdomen--consult pending to evaluate for cystic/urethral calculi

**BREED** English Bulldog

**SEX** NM

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Lateral and ventrodorsal views of the abdomen totaling 4 images available for review.

**AGE** 2 Years, 8 Months

**RADIOGRAPHIC FINDINGS**

Mild intervertebral disc space collapse and herniation of mineralized disc material are seen between L2 and L3 in the cranial lumbar spine.

**INTERPRETED BY** Nele Eley, DVM  
Dr. med. Vet. DipECVDI

The abdominal serosal detail is maintained.

The urinary bladder is mildly distended. No evidence of abnormal opacities is seen throughout the urinary bladder and urethra.

**HOSPITAL NAME** DPC Veterinary Hospital

Position, size, shape, and opacity of the kidneys are considered within normal limits.

The spleen, liver, and gastrointestinal tract present within expected limits.

**REFERRING VET RADIOGRAPHIC DIAGNOSIS**

- Chondroid disc degeneration and disc herniation L2/3.
- No evidence of radiopaque urinary bladder or urethral calculi.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE** 56525 The radiographic presentation of the lower urinary tract is within normal limits. Urinary tract pathology such as cystitis, urethritis, nonradiopaque calculi, bladder dysfunction, and neoplasia cannot be ruled out. Further definition by means of ultrasound and full urinalysis could be considered.

**DATE** 2-2-23 The significance of the disc herniation in the cranial lumbar spine with respect to the clinical signs is uncertain. Presence of compressive or non-compressive disc hernia within the cranial lumbar spine, however, should be considered a potential in this patient.



**PATIENT**

Cholo Silva

**SPECIES**

Canine

**BREED**

English Bulldog

**SEX**

NM

**AGE**

2 Years, 8 Months

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**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

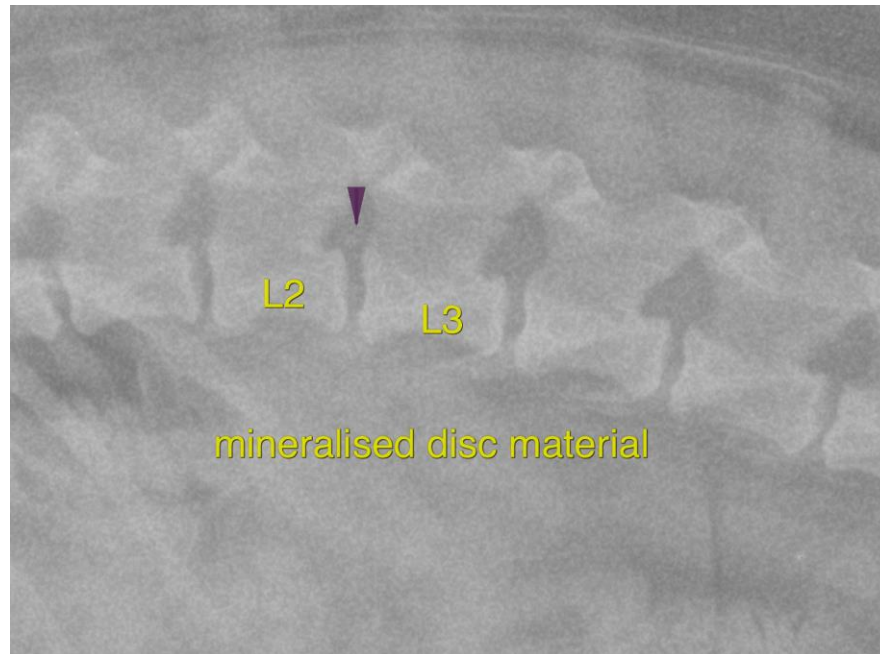
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**INVOICE**

56525

**DATE**

2-2-23



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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
Nele.Eley@sonopath.com