

PATIENT

Lily Field

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Dr. Michael Ferber

HOSPITAL NAME

East Meadow VC

REFERRING VET

Dr. Ferber

INVOICE

72071

DATE

3/2/26

PRESENTING CLINICAL SIGNS

- Chronic hematuria
- Previous UA revealed pyuria / hematuria
- no C+S performed
- partial response to clavamox trial but ctd hematuria noted by owner
- no other abnormalities have been noted by owner
- No blood testing performed in 2025 or 2026

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. A large amount of floating and adhered hyperechogenic sediment creating a mass like effect within the bladder lumen.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 5.1 cm, right measured 5.3 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

Adrenal Glands

The left adrenal gland was not clearly visualized, but appears to be of normal shape, echogenic appearance and size. The right adrenal gland was not visualized.

Spleen

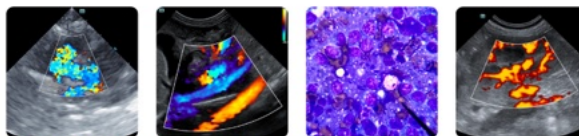
Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 2.3 cm in width.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder

The gallbladder is small containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.



PATIENT

Lily Field

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Dr. Michael Ferber

HOSPITAL NAME

East Meadow VC

REFERRING VET

Dr. Ferber

INVOICE

72071

DATE

3/2/26

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

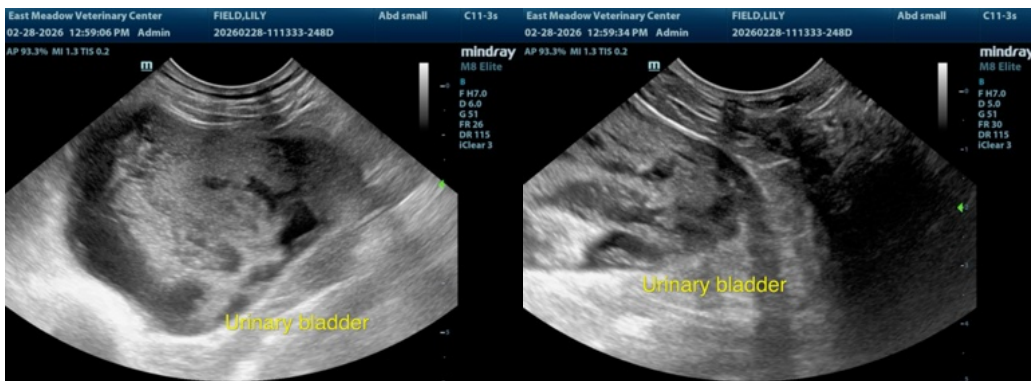
- Urinary bladder sediment.

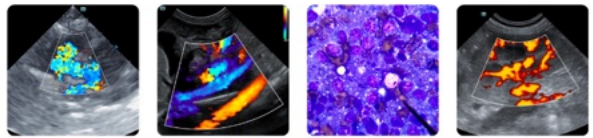
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the urinary bladder sediment would be hematuria with hematoma formation. However, a small bladder mass cannot be excluded as it may be obscured by the hematoma and hematuria.

Further assessment would be catheterization of the urinary bladder in order to obtain a urine sample for urinalysis, culture and BRAF analysis as well as allowing for flushing of the urinary bladder and repeating the ultrasound and/or a positive contrast cystogram.

Specific therapy would be dependent on an etiological diagnosis.





PATIENT

Lily Field

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Dr. Michael Ferber

HOSPITAL NAME

East Meadow VC

REFERRING VET

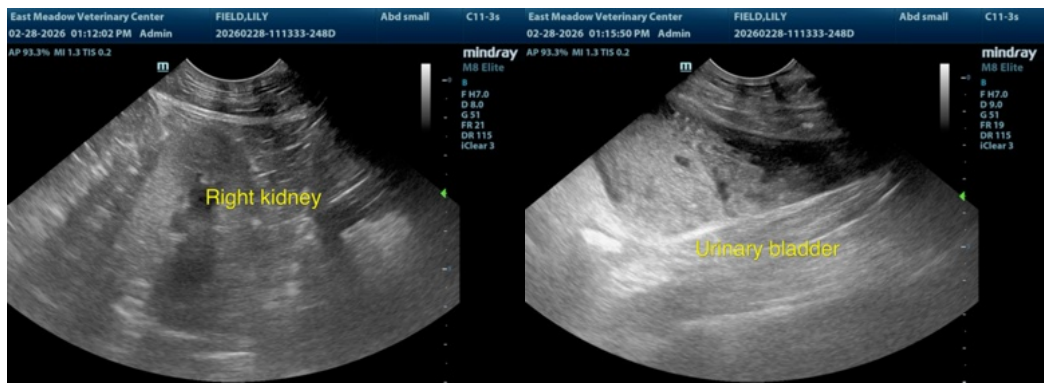
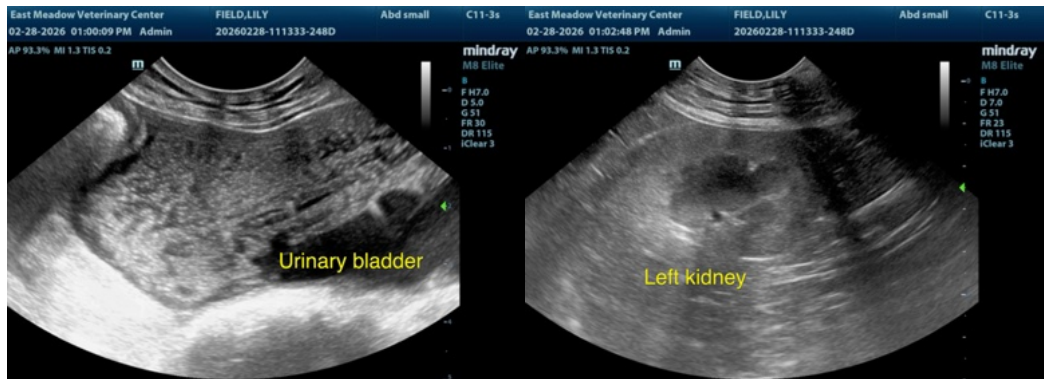
Dr. Ferber

INVOICE

72071

DATE

3/2/26



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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

info@sonopath.com