



## PATIENT

Rosie Phillips

## SPECIES

Canine

## BREED

Miniature Dachshund

## SEX

Spayed female

## AGE

9 years

## WEIGHT

13.3 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Devon Papa CVT

## HOSPITAL NAME

Valley VS

## REFERRING VET

Dr. Riddlebaugh

## INVOICE

74044

## DATE

4/2/26

## PRESENTING CLINICAL SIGNS

- Presented on 3/12 for suspected UTI. In-house UA done and dispensed Clavamox.
- Owner reported improvement with symptoms while on abx but symptoms returned w/i days of finishing.
- Recheck in-house UA still showed UTI. Sent out Culture, no growth.
- 3/12: Free catch urine WBC 36/HPF RBC 2/HPF Rods and cocci present SG 1.014 pH 8.0 LEU 25 BLD 50 3/26: Free catch urine WBC >50/HPF RBC 24/HPF Rods present. pH 9.0 SG 1.022 LEU 100 BLD 250 Culture by Cysto: no growth

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. A scant amount of floating, hyperechogenic sediment.

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 4.0 cm, right measured 4.1 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.

### Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.4 cm and 0.46 cm in width. The right adrenal gland measured 0.37 cm and 0.41 cm in width.

### 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 1.4 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.



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## ***Gallbladder***

The gallbladder is full containing a small amount of non-adhered, hyperechogenic sediment. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

## ***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. Fecal material was present in the colon.

## ***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**

- Gallbladder sediment.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

In essence this is a normal ultrasound examination fo the abdomen as the gallbladder sediment can be considered an incidental finding.

On this ultrasound there is no obvious etiology for the recurrent UTI.

As the UTI has been diagnosed on a free catch urine sample, it is possible that there is underlying pathology in the urethra or vaginal canal.

Further assessment would be urinalysis on a cystocentesis sample, vaginoscopy, and possible a contrast urethrogram.

Specific therapy would be dependent on an etiological diagnosis.



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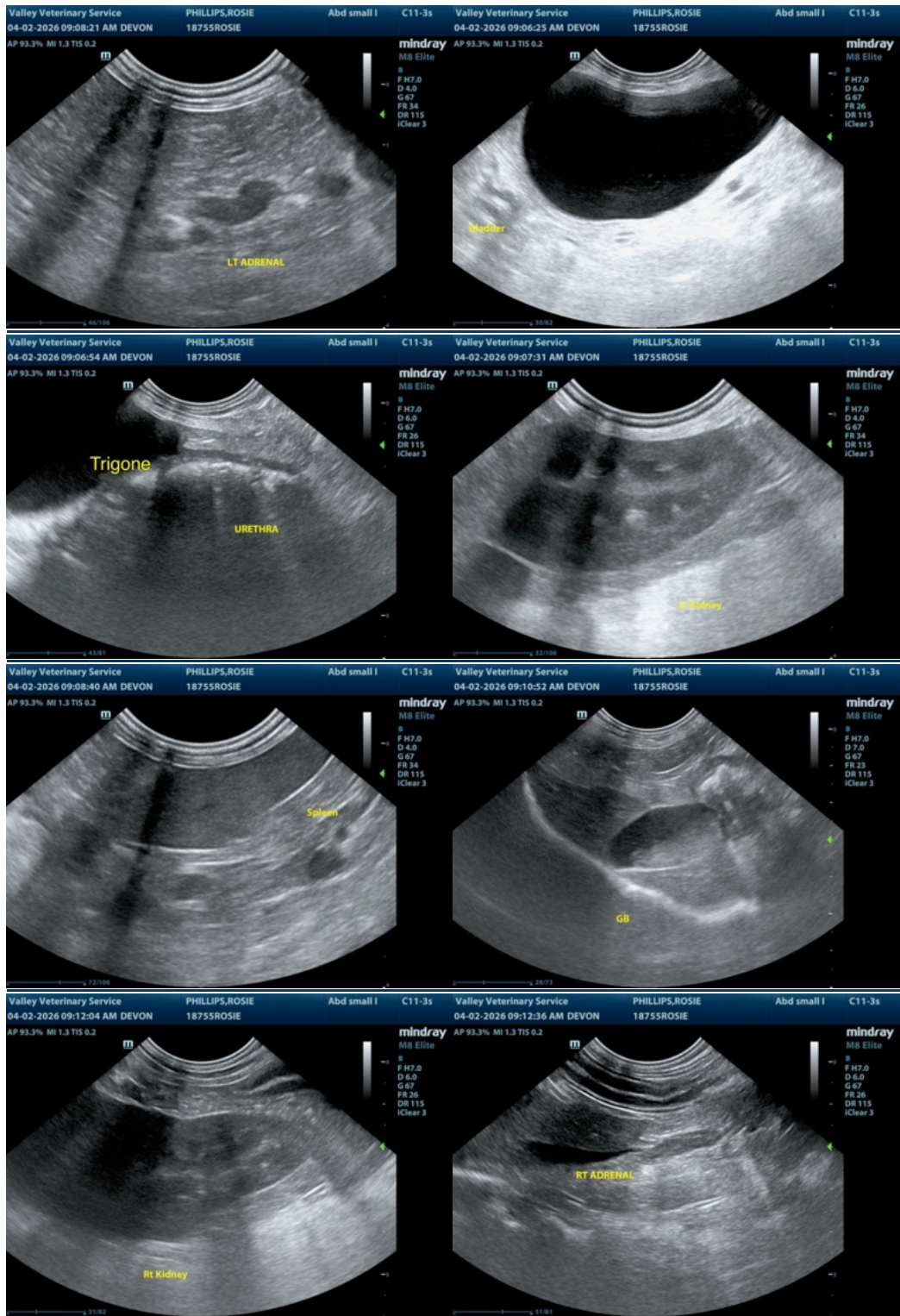
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The information and recommendations provided are based on the images presented by the



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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](mailto:info@sonopath.com)