



PATIENT

Nala Cook

SPECIES

Canine

BREED

Golden Retriever

SEX

Female

AGE

13 Weeks

WEIGHT

8.58

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Cameron J. &
Samantha S.

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

REFERRING VET

Dr. Rory Applegate
DACVIM-IM

INVOICE

14526

DATE

03/20/26

PRESENTING CLINICAL SIGNS

- Partial urinary incontinence since acquiring at 9 weeks old; worsens in sleep; screening for ectopic ureters vs sphincter incompetence.

Abnormal PE/Chem/CBC/UA Results: NSF

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present irregular margins and the volume of the left kidney is significantly decreased. The right kidney presents a moderate increased volume. The renal pelvis bilaterally is mildly dilated. Both ureters are dilated, measuring up to 3.7 mm in diameter. The ureterovesical junction is approximately 2.0 cm cranial to the bladder neck. Contrast media is only appreciated in the urinary bladder.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities, the growth plates are age related visible.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left sided renal hypoplasia
- Compensatory hypertrophy right kidney
- Bilateral mild pyelectasis
- Bilateral mild ureteral dilation
- No evidence of ureteral ectopia bilaterally

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The renal changes are indicative for renal dysplasia, L>>>R, and compensatory hypertrophy of the right kidney. The ureteral dilation may be a sequela to chronic renal disease.

The CT is negative for ureteral ectopia, but despite the excellent preparation of the patient, the contrast filling of the distal segment of the ureters is only poor and theoretically an intramural ectopic ureter cannot be ruled out. In case of strong clinical suspicion further workup by means of cystoscopy should be considered.



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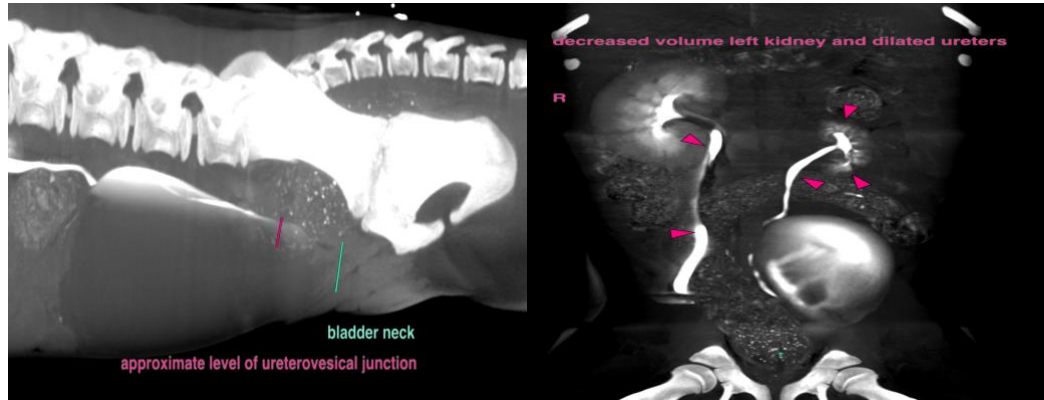
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Other underlying causes – such as urethrocele, urinary bladder/lower sphincter dyssynergia, behavioral problems, juvenile incontinence, PU/PD – need to be considered as well.



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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