



PATIENT

Joy Rumyantseva

PRESENTING CLINICAL SIGNS

2 yo FS Labrador Retriever. Urinary incontinence has been present since birth / adoption (prior to spay). No other abnormal urinary signs at home, just dribbles urine while sleeping and exercising. Normal clinically otherwise. Small for her breed "runt of the litter", no abnormal neurologic signs. Abnormal PE/Chem/CBC/UA Results: Tucked vulva, small in stature, otherwise normal PE
CBC, Chem normal UA, UCS pending

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE ABDOMEN

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

BREED

Labrador Retriever

COMPUTED TOMOGRAPHIC FINDINGS

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

SEX

FS

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted. Both ureters present with the expected course and are not dilated. The vesicoureteral junction bilaterally is approximately 1.6 cm cranial to the vesicourethral junction. No contrast medial is appreciated in the urethra throughout all post contrast series of the abdomen.

AGE

2 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

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.

HOSPITAL NAME

Animal Health
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The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- No evidence of ureteral ectopia
- Structural normal abdomen

REFERRING VET

Dr. Ashley Gold

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT is negative for ureteral ectopia. Workup of the urinary incontinence can be accomplished by cystoscopy to rule out mural abnormalities.

INVOICE

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

DATE

5-31-22

Also note that dogs that are spayed early at an age of < 3 months are known to have an incidence of incontinence of 12 % and dogs spayed at an age > 3 months of 5%*. Consider a therapy with ephedrine as first choice medication.



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*Resources:Spain, C. Victor, Janet M. Scarlett, and Katherine A. Houpt. "Long-term risks and benefits of early-age gonadectomy in dogs." Journal of the American Veterinary Medical Association 224.3 (2004): 380-387.

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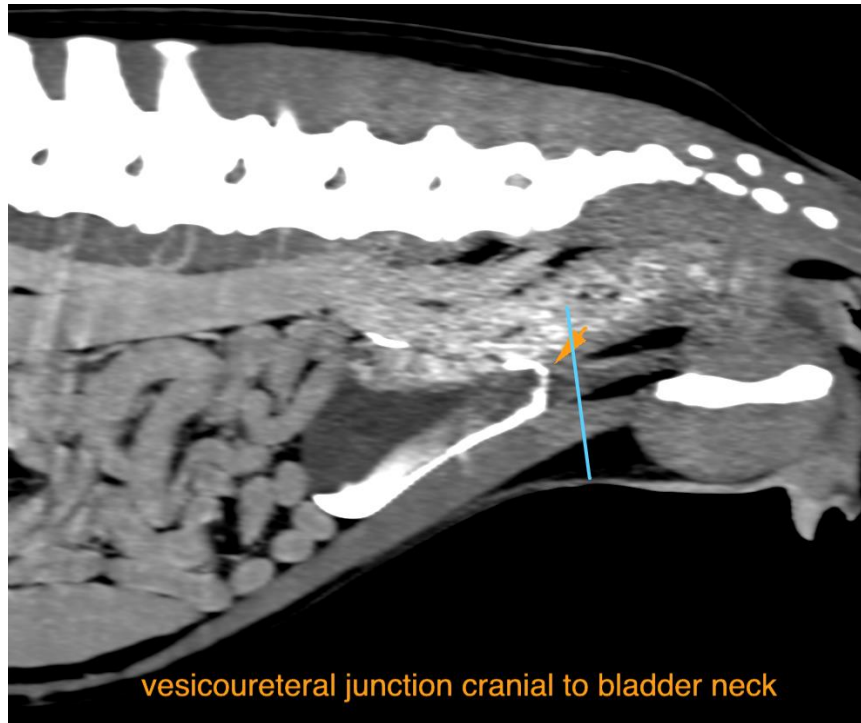
Dr. Ashley Gold

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vesicoureteral junction cranial to bladder neck

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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