



PATIENT

Peanut Da Costa

PRESENTING CLINICAL SIGNS

Peanut has been urinary incontinent since adoption - dribbles urine constantly. She also has a very prominent / swollen vulva, as well as prominent mammary tissue. No exogenous hormone sources. Not in heat. Mild azotemia.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Markedly prominent / swollen vulva - lifelong; not in heat. Mildly prominent mammary tissue. Dribbling urine during exam Mildly increased BUN, creatinine at high end of normal. Unable to obtain urine sample from bladder (too small)

BREED

American Bulldog

COMPUTED TOMOGRAPHY OF THE ABDOMEN

A pre- and post-contrast CT study of the abdomen in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FI

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

The volume of the right kidney is markedly decreased, measuring 10 x 9 x 19 mm in size. The renal pelvis of the right kidney is significantly dilated, and the proximal segment of the right ureter is dilated, measuring up to 12 mm in diameter. The right ureter is tapering in its course caudally, presenting a physiological diameter in the caudal third. No contrast excretion by the right kidney is appreciated.

AGE

8 Months

The left kidney presents irregular margins with multiple concave depressions of the renal surface. Post contrast administration, multiple wedge shaped parenchymal filling defects are seen throughout the parenchyma of the left kidney. The left ureter is mildly dilated, measuring up to 3 mm in diameter. The left ureter can be followed caudally along coursing along the left lateral aspect of the bladder neck and the urethra, possibly merging with the distal segment of the urethra/region of the external urethral orifice – contrast media can be appreciated oozing through the vaginal vestibule. No contrast is accumulating in the urinary bladder in the consecutive post contrast phases.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Health
Partners

The urinary bladder is empty and the size is markedly decreased.

Both ovaries present with roundish contrast enhancing bodies – likely functional units.

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

REFERRING VET

Dr. Ashley Gold

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.

INVOICE

53606

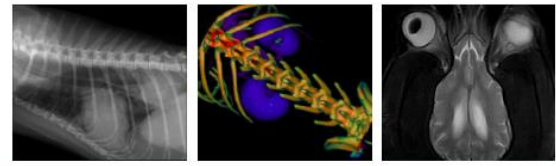
The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

DATE

8-19-22

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

The mammary complexes are prominent.



PATIENT **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Peanut Da Costa

- Left sided ectopic ureter – suspect orifice in distal segment of the urethra or vagina – and mild left sided ureteral dilation
- Chronic nephropathy left kidney
- Right renal hypoplasia without contrast excretion
- Right hydroureter
- Suspect atrophic urinary bladder – no contrast is excreted to the urinary bladder
- Prominent mammary complexes – correlate with estrous cycle

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is consistent with congenital malformation of the urinary bladder – with hypoplasia of the right kidney & right sided hydroureter and left sided ectopic ureter with far caudal termination of the ureter in the urethra – possibly in the region of the urethral orifice. The latter is explaining the presenting clinical signs of constant urinary dribbling. The urinary bladder is completely empty, and the volume is subjectively significantly decreased – likely due to lack urine filling throughout the entire life – and ‘disuse’-atrophy is considered likely.

The changes of the left kidney can be a sequela to chronic nephritis secondary to ascending infection triggered by the left ectopic ureter or represents renal dysplasia.

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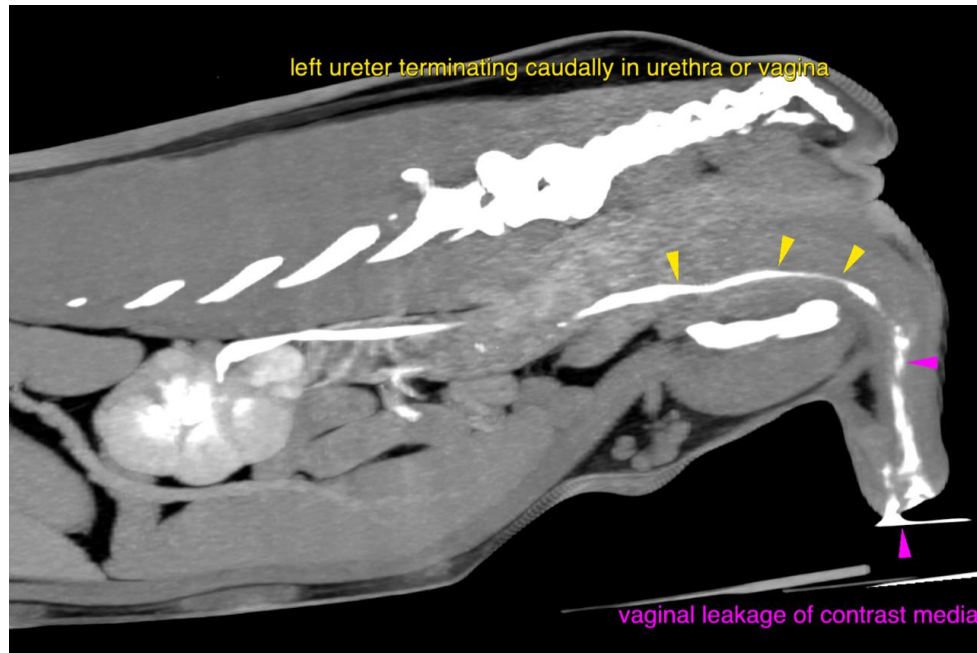
Dr. Ashley Gold

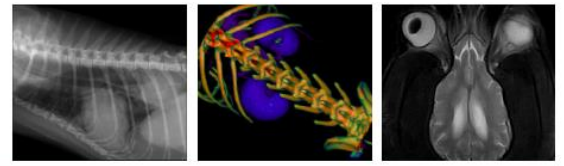
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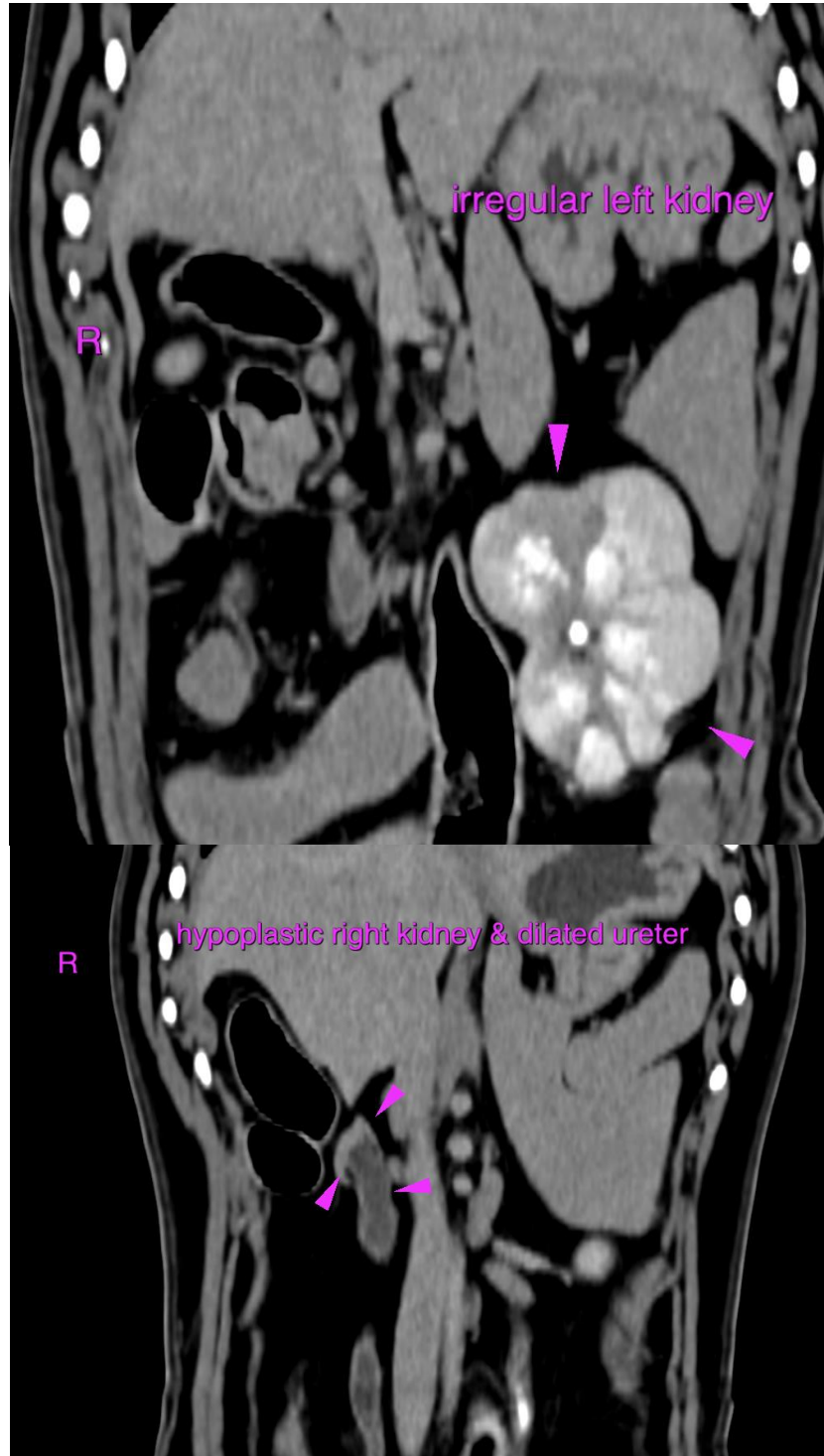
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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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