



**PATIENT PRESENTING CLINICAL SIGNS**

**Rufus Dupre** UTI, also urinating more frequently and with more difficulty. Still able to urinate though. We are wanting to assess the urethral stone(s) and check for any other stones (bladder) that need intervention. Urethrotomy vs. cystotomy?

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Urine culture positive for Enterobacter aerogenes with resistance to penicillins and cephalosporins. Moderately elevated ALP.

Canine

**COMPUTED TOMOGRAPHIC STUDY OF ABDOMEN AND PERINEAL REGION**

**BREED** A high-resolution pre- and post-contrast CT study of the abdomen and perineal region are provided for review.

Maltipoo

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX** An irregular shaped mineral opaque calculus is seen in the pathway of the penile urethra. It measures approximately 0.51cm. The calculus in the urethra is angular shaped. The urethral mucosa/wall is mildly thickened.

MN

**AGE** The urinary bladder is moderately filled, with the apex in the plane of the 6th lumbar vertebra, is homogeneously soft tissue opaque, and contains two dorsally dependent faintly mineral opaque material visible on the pre-contrast series. Soft tissue mixed with iodate contrast media is seen on the latter post-contrast series. No evidence of wall thickness.

7 Years

The renal silhouettes are normal in size, shape, contour, and attenuation on the pre- and post-contrast studies. The renal length is 4.2cm in the right kidney and 4.5cm in the left kidney. The pelvis is normal in diameter, no evidence of pyelectasia, pelvic dilatation or calculi.

**INTERPRETED BY**

The ureters are normal in size and correct insertion on the trigone region.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

The liver is homogeneously soft tissue attenuating and uniformly contrast enhancing. The gallbladder is unremarkable.

**HOSPITAL NAME**

The spleen is diffusely enlarged, homogeneously soft tissue attenuating, and uniformly contrast enhancing, most likely correlated to the anesthesia procedure.

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The stomach is moderately filled and normally positioned, containing gas admixed with heterogenous soft tissue attenuating material – food, with gas.

**REFERRING VET**

The duodenum and small intestine are nondilated and contain a minimal amount of fluid, scant amount of fine mineral attenuating material, and gas.

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The colon and rectum contain gas admixed with soft tissue and mineral attenuating fecal material.

**INVOICE**

The pancreas and mesentery are normal.

56168

The abdominal lymph nodes and adrenal glands are normal.

**DATE**

The remainder the abdomen is normal.

1-11-23



**PATIENT**

Rufus Dupre

The dorsal dependent peripheral lung lobes present mild ground glass appearance with patchy alveolar pattern and represent passive atelectasis.

The remainder of the collimated thorax is normal.

**SPECIES**

Canine

No musculoskeletal abnormalities are identified.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**BREED**

Maltipoo

- Urethral calculus positioned at penile level and moderately expanded bladder; urethral partial obstruction is suspected, less likely complete obstruction if correlated with patient's history.
- Two small bladder calculus or faint mineral material.
- Otherwise, normal abdomen.
- Passive recumbency pulmonary atelectasis.

**SEX**

MN

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The position, size of the urethral penile calculi, size of the bladder, and patient's history indicates a partial or less likely total urinary tract obstruction. Urethral catheterization under heavy sedation or general anesthesia, in combination with epidural anesthesia typically allows successful retrograde urohydropropulsion, preventing the need for urethrotomy and the calculi can all be removed by cystotomy.

Post-obstructive management geared toward nursing care, maintaining fluid balance, correction of metabolic derangements, and sedation/analgesia as well as concurrent inflammatory and/or infectious cystitis and urethritis management are recommended.

**INTERPRETED BY**

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**HOSPITAL NAME**

Animal Health Care  
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**REFERRING VET**

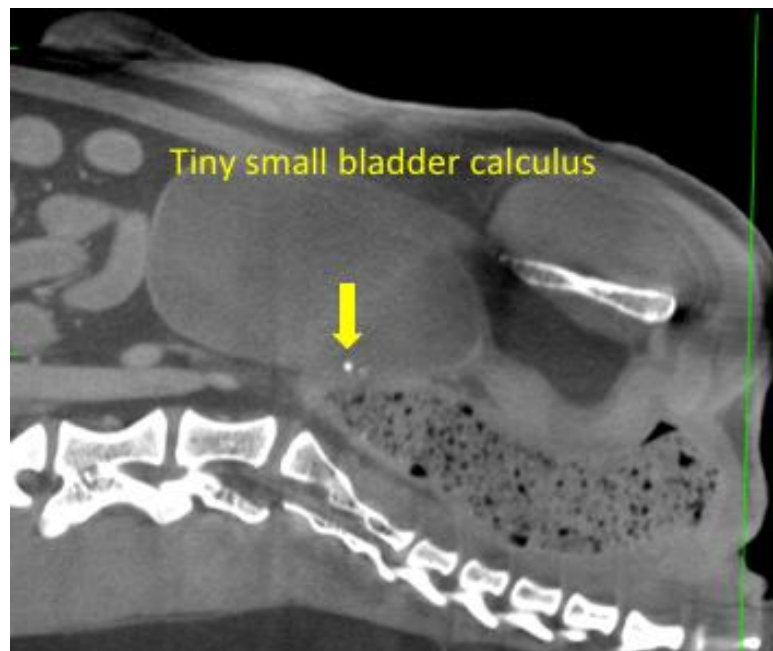
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**DATE**

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**PATIENT**

Rufus Dupre

**SPECIES**

Canine

**BREED**

Maltipoo

**SEX**

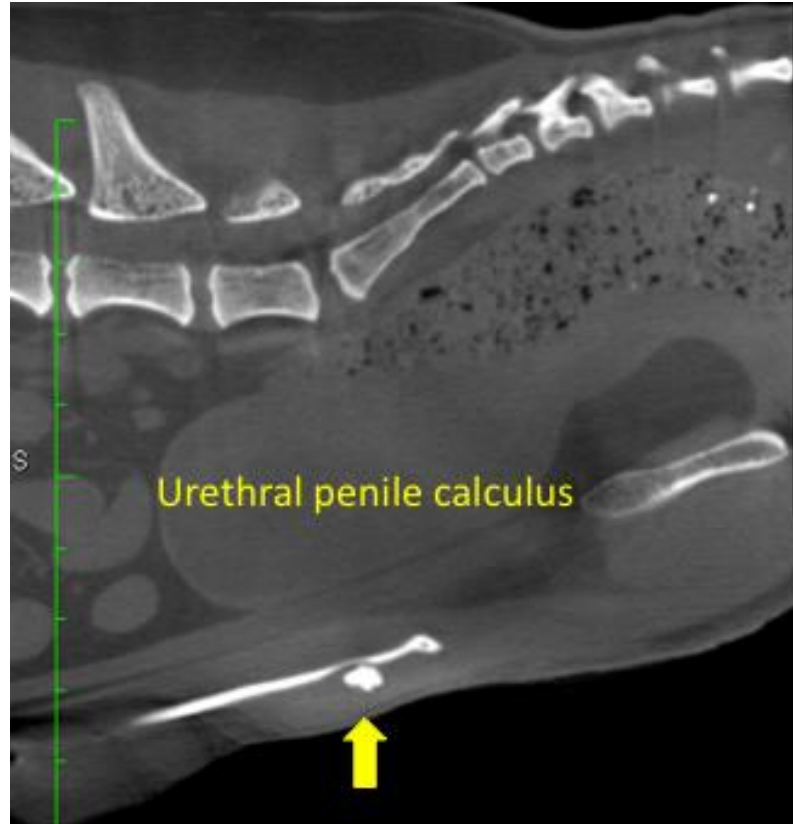
MN

**AGE**

7 Years

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Vet., Dipl. CBraRVet



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