

EMERGENCY SERVICE

ER VISIT REPORT for "Daisy" Levykam Sunday, July 13, 2025

SEEN BY: Katherine Gridley, DVM
LOCATION: BluePearl Veterinary Partners -Midtown
REFERRING VETERINARIAN: Dr. David Birse
REFERRING CLINIC: Bond Vet (Hell's Kitchen)
Phone: (212) 466-6115 Fax:

OWNER: Brittany Levykam
PHONE: (727) 313-0062
PATIENT: Daisy, Female, Bulldog, French, 4 Yrs. 0 Mos.

Presenting Complaint: bladder stone

History:

Daisy presents as a transfer for a newly diagnosed bladder stone. She was adopted by her owner last week from a family member. In the last day or two Daisy has been urinating more frequently and it has been slightly blood tinged. Daisy was brought to Bond for evaluation and a one view partial abdominal radiograph noted a large bladder stone. A urinalysis performed recently noted struvite crystals.

	7/13/2025
	8:39 PM
Vital Sign	KGR
Weight	8.9 kilograms
Temp	101.4
Pulse	120
Resp	pant
Alert	BAR
Muc	Pink/Healthy
Memb	
CRT	<2 sec

Physical Examination:

CRT: <2s. Gums: pink, moist
S: BAR, normal hydration
O:
Eyes: Grossly appropriate OU
Ears: Unremarkable AU
Nasal and Oral Cavity: No nasal discharge. Mild to moderate dental tartar.
PLN: WNL
Heart/Lungs: No murmurs or arrhythmias. Pulses strong and synchronous. Eupneic, lungs clear.
Abd: Soft, non-painful. Firm mass in the caudal abdomen.
U/G: Normal external genitalia. No discharge.
Musculoskeletal: Ambulatory x 4 with no appreciable lameness. BCS = 5/9
Integument: Appropriate haircoat.
Neuro: Appropriate mentation.
Rectal: Not performed.

Problem List/Differential Diagnoses:

Bladder stone
Hematuria
Pollakiuria

Recommendations:

Discussed obvious bladder stone that does require surgery but is not emergent. Discussed repeat complete abdominal radiographs to evaluate full extent of stone. Discussed risks associated with waiting too long for cystotomy (blockage, azotemia). Recommended chemistry at the least to evaluate for kidney changes-declined.

Diagnostics:

none

Treatment:

none

Medications:

Item Description	Directions	Quantity
Gabapentin 100 mg Capsule	Give 1 capsule by mouth every 8 to 12 hours as needed for discomfort and pain. May cause sedation.	30.00

Start morning of 7/14 as needed

drug handout provided

Discharge Instructions: Daisy was presented as a transfer for evaluation of a bladder stone. She was bright and alert on presentation with stable vitals. Palpation of her abdomen noted a firm mass effect consistent with the history of a bladder stone. Bloodwork was recommended to evaluate her kidney values, but you have elected to wait.

As discussed, Daisy does require surgery to remove the bladder stone (cystotomy) as a dissolution diet is not alone sufficient, however it is not something that needs to be performed tonight. Her urinary signs will continue until the stone is removed.

Struvite or magnesium ammonium phosphate uroliths are the most common uroliths in dogs. Uroliths that predominantly consist of struvite may also contain a small amount of calcium phosphate (hydroxyapatite) or calcium carbonate. Because of their high association with UTIs, struvite uroliths are more common in female dogs (80% to 97% of uroliths in female dogs are struvite). Uroliths in dogs less than 1 year of age are usually struvite and are also frequently associated with a UTI.

After Daisy has surgery, she will likely be started on a prescription diet that will help control the acidity (pH) of her urine to decrease the chances of more stones forming. These include Hills C/D, Purina St/Ox, and Royal Canin S/O. You can purchase these diets through 1-800-PetMeds or Chewy.com. You can also contact your regular veterinarian to see if they sell these products. If you do switch to these diets, these can be the only foods given as they alter the pH of the urine.

I recommend calling primary vets to see what the cost of a cystotomy would be at their practice. I recommend having this surgery performed as soon as you're able.

Monitoring: Please watch for profuse vomiting, diarrhea, lethargy, or prolonged inappetence. Please watch for a lack of urination over a 24 hour span as this constitutes an emergency.

Thank you for allowing us to care for Daisy!

Sincerely,

Katherine Gridley, DVM