



## PATIENT

Biscotti Ball

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

16 years

## WEIGHT

7.46 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Dr. Nicole Carney

## HOSPITAL NAME

Smithfield AH

## REFERRING VET

Dr. Carney

## INVOICE

68678

## DATE

11/13/25

## PRESENTING CLINICAL SIGNS

History: Kidney values have improved, ALT now elevated. Patient still intermittent vomiting, decreased appetite - however improved clinical signs per owner.  
Abnormal PE/Chem/CBC/UA Results: ALT 201, GGT 5

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is anechoic, with a few floating echoes, but no sediment or calculi. Normal appearance of the proximal urethra and vesicoureteral junction. No evidence of inflammatory or neoplastic changes.

The left kidney appears small and irregular. The cortex is more hyperechoic and thinned, with early loss of corticomedullary differentiation. A few small calculi are also observed, without pyelectasia or associated hydronephrosis.

The right kidney is normal in shape and size: 3.64×2.33 cm, and the thickness of the cortex is 0.41 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis.

### Adrenal Glands

The left adrenal gland was uniform and measures 0.24 cm at the cranial pole and 0.23 cm at the caudal pole. The right adrenal gland cannot be clearly visualized.

### Spleen

Splenic thickness is 0.71 cm. The parenchyma demonstrates normal echogenicity and fine homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

### Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The liver parenchyma appears uniform and isoechoic compared to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The wall is thin, and the contents are primarily anechoic. No evident dilation of the cystic duct or common bile duct is observed.



## PATIENT

Biscotti Ball

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

16 years

## WEIGHT

7.46 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Dr. Nicole Carney

## HOSPITAL NAME

Smithfield AH

## REFERRING VET

Dr. Carney

## INVOICE

68678

## DATE

11/13/25

## *Gastrointestinal*

The stomach is empty, with a minimal amount of food remnants, with mural thickness (1.27 mm) and preserved wall layering. Duodenum: 1.49 mm.

Jejunum: 2.96 mm (Mucosa: 1.78 mm; Submucosa: 0.49 mm; Muscularis propria: 0.31 mm). Ileum: 1.80 mm (Mucosa: 0.67 mm; Submucosa: 0.76 mm; Muscularis propria: 0.47 mm). Wall layering is normal. Ileocecal junction: 3.20 mm (muscularis: 1.01 mm). No signs of obstruction, ileus, or foreign material are identified.

Colon: ascending colon 1.08 mm with semiliquid material. Descending colon 0.90 mm; the distal descending colon is very empty and collapsed and cannot be measured.

## *Pancreas*

The pancreas measured 3.50–5.50 mm. The pancreatic areas examined show no evident signs of inflammation.

## *Peritoneal Cavity*

No abdominal effusion or peritonitis is observed. Ileocecal lymph nodes measure 3.81 mm in thickness, with normal shape and echogenicity. Cranial mesenteric lymph nodes are not visualized, but the surrounding regions appear unremarkable. The iliac trifurcation is normal.

## ULTRASONOGRAPHIC FINDINGS

- The left kidney appears small and irregular in shape, with a hyperechoic and thinned renal cortex, showing early loss of corticomedullary differentiation, and containing small renal calculi.
- Few floating echoes within the urinary bladder (no calculi).

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasound examination shows chronic structural changes affecting the left kidney, including reduced size, cortical thinning, and hyperechogenicity with loss of corticomedullary definition. These findings are consistent with chronic kidney disease affecting the left kidney, likely long-standing. The presence of small renal calculi without obstruction further supports a chronic process.

The liver appears structurally normal on ultrasound. Given the patient's age, intermittent vomiting, weight concerns, and the lack of hepatic ultrasonographic abnormalities, hyperthyroidism should be considered a relevant differential diagnosis for the elevated ALT.

Overall, the findings suggest chronic left renal disease, with ALT elevation potentially secondary to concurrent systemic disease, including hyperthyroidism, hepatic metabolic stress, or medication effects.



## PATIENT

Biscotti Ball

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

16 years

## WEIGHT

7.46 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Dr. Nicole Carney

## HOSPITAL NAME

Smithfield AH

## REFERRING VET

Dr. Carney

## INVOICE

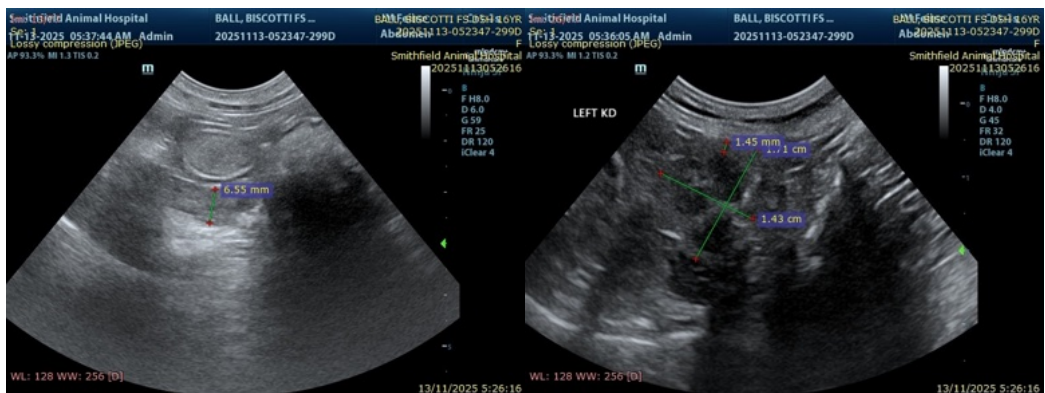
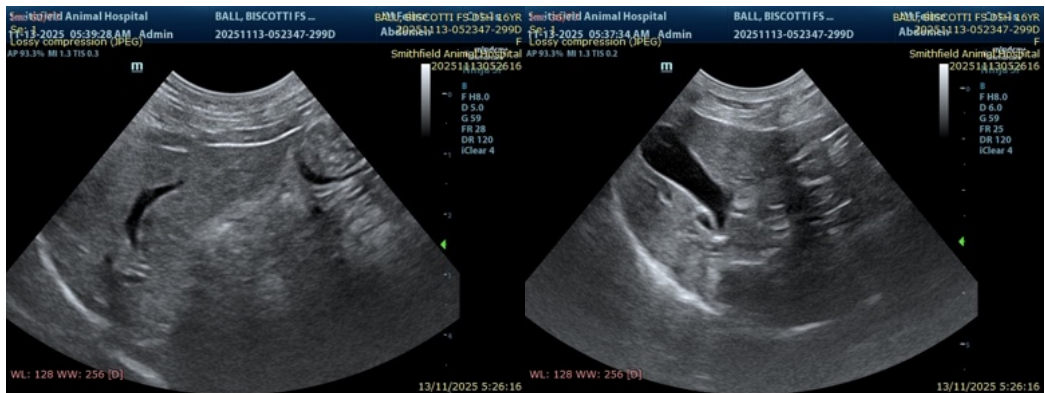
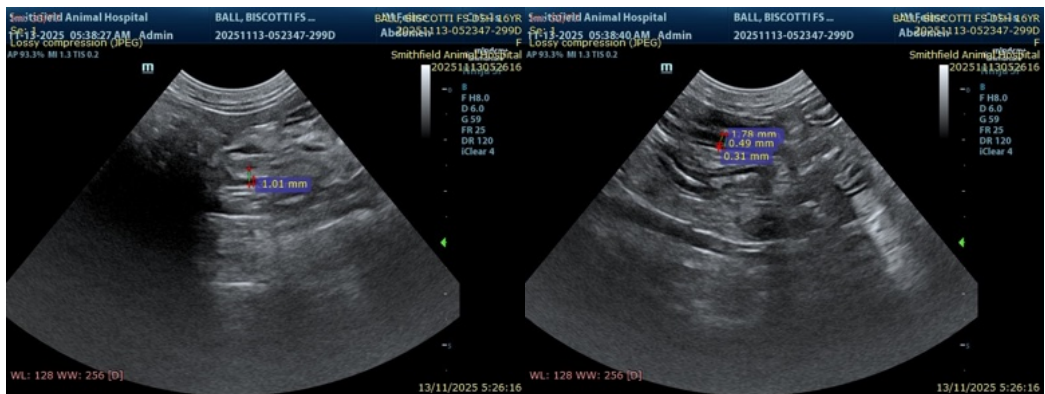
68678

## DATE

11/13/25

## Recommendations

- Test for hyperthyroidism.
- Urinalysis +UPC.
- Monitor hepatic values.
- Monitor kidney values (SDMA, creatinine, BUN, electrolytes) and blood pressure to track progression of chronic renal changes.





## PATIENT

Biscotti Ball

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

16 years

## WEIGHT

7.46 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Dr. Nicole Carney

## HOSPITAL NAME

Smithfield AH

## REFERRING VET

Dr. Carney

## INVOICE

68678

## DATE

11/13/25

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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

[info@SonoPath.com](mailto:info@SonoPath.com)