



PATIENT

Cubbie Hay-Hanscam

SPECIES

Canine

BREED

Terrier X

SEX

Spayed Female

AGE

13.5 Years

WEIGHT

8.6 Pounds

INTERPRETED BY

Andrea Nicastro, DMV,
Diplomate DACVIM
(Small Animal
Internal Medicine)

**IMAGING
PERFORMED BY**

K. Peterson

HOSPITAL NAME

Wilvet Salem

REFERRING VET

Kristin Peterson

INVOICE

13985

DATE

2/19/22

PRESENTING CLINICAL SIGNS

History: Symptoms began Friday or Saturday of last week. O initially thought that P was straining to defecate prior to bringing P into rDVM and had a twitch/ jerk that was randomly occurring. P then began to act ADR, spacy and not wanting to jump on couch very much. P was still walking on leash on Monday and was still eating. Hosp. @rDVM since 2/14/22, diagnosed w/ renal failure +/- liver dz, w/ open diagnoses. Some improvement in renal values but ALT increasing. P very ataxic. O states that P will eat for her during visits, but P seems to have difficulty w/ eating (puts head in bowl, seems maybe tired or having difficulty w/ using tongue).

Abnormal PE/Chem/CBC/UA Results: 2/14 - CBC - HCT 54.8 rest wnl Chem - Azotemia CREA 11.7, BUN 124, Hyperphosphatemia 11.0, Hypercalcemia 13.2, Elevated ALT 285, UA - USG 1.015, 2+ granular casts rest wnl 2/16 Chem - CREA 7.2, BUN 73, Phos 7.4, K 3.3 2/18 Chem - CREA 8.0, BUN 77, P 9.1, Ca 12.2, ALT 383, Lipase 2424, Hyperkalemia 6.6

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

The left kidney presented normal size (3.52 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. Moderate pyelectasia is present (0.79 cm) in the longitudinal plane. Several nonobstructive nephroliths are visualized. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

The right kidney presented normal size (4.93 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. Moderate to severe pyelectasia is present (0.99 cm) in the longitudinal plane. Several nonobstructive nephroliths are visualized. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is mildly enlarged (0.51 cm at cranial pole) (0.65 cm at caudal pole); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The caudal pole of the right adrenal gland is visualized and is normal in size (0.47 cm in width) with a normal shape, glandular echogenicity and detail. Surrounding vasculature is normal.

Spleen

The spleen is normal in size (0.86 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Liver



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The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

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The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal.

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Gastrointestinal

The gastric lumen is mildly distended with ingesta and soft shadowing material. The gastric wall is normal to mildly thickened (up to 0.61 cm) with apparent retention of the normal layering pattern. The small intestinal lumen is not dilated. One, several cm segment of bowel, in the left mid abdomen, is hyperperistaltic. This segment is thickened (up to 0.61 cm) with retention of the normal layering pattern. It is unclear if this segment represents small intestine or colon. The remaining small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified.

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Pancreas

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

WEIGHT

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Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bilateral nephropathy with pyelectasia and non-obstructive nephrolithiasis

Secondary Findings

- Mild left adrenomegaly
- The gastric and bowel abnormalities are most consistent with inflammatory process with a lower possibility of emerging neoplasia. The soft shadowing gastric luminal contents may represent normal ingesta and-or foreign material (i.e., grass). Correlation with clinical findings is recommended.
- Age-related pancreatic remodeling/fibrosis. Concurrent pancreatitis may be present, depending on if the patient exhibits discomfort on cranial abdominal palpation.

*An obvious cause for the patients elevated ALT is not identified in the study. Possible considerations include inflammatory disease, reactive hepatopathy, infection, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Regarding the clinical history and renal changes, consider the following:

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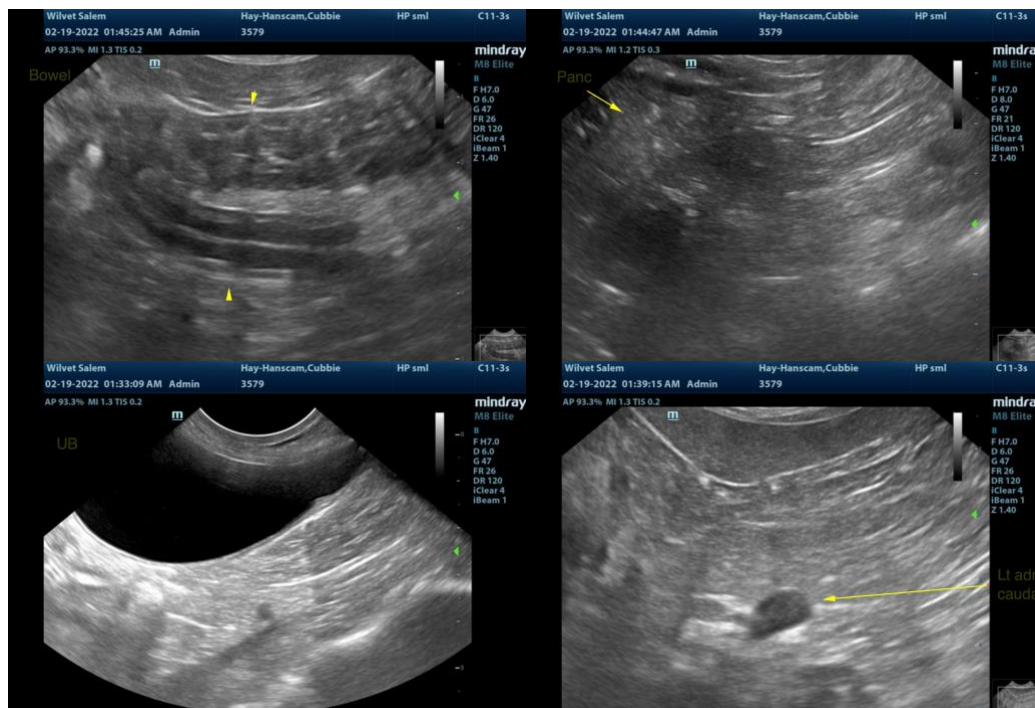
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1. Urine culture and sensitivity, preferably on a pre-antibiotic sample.
 2. Baseline blood pressure measurement
 3. UPC (if proteinuria is present)
 4. IV fluid diuresis, gastric protectants, antiemetics and supportive care as well as empirical broad spectrum antibiotic therapy (while awaiting urine culture and sensitivity results).
 5. If renal values do not continue to improve, consider referral for hemodialysis.
 6. Also consider Leptospirosis testing (i.e., blood and urine PCR, serology), particularly given the azotemia and ALT elevation.
- A thorough neurologic examination is also recommended, given the presence of neuro signs. Consultation with a board-certified neurologist should be considered.
 - Three-view thoracic radiographs are also recommended, if not already performed.





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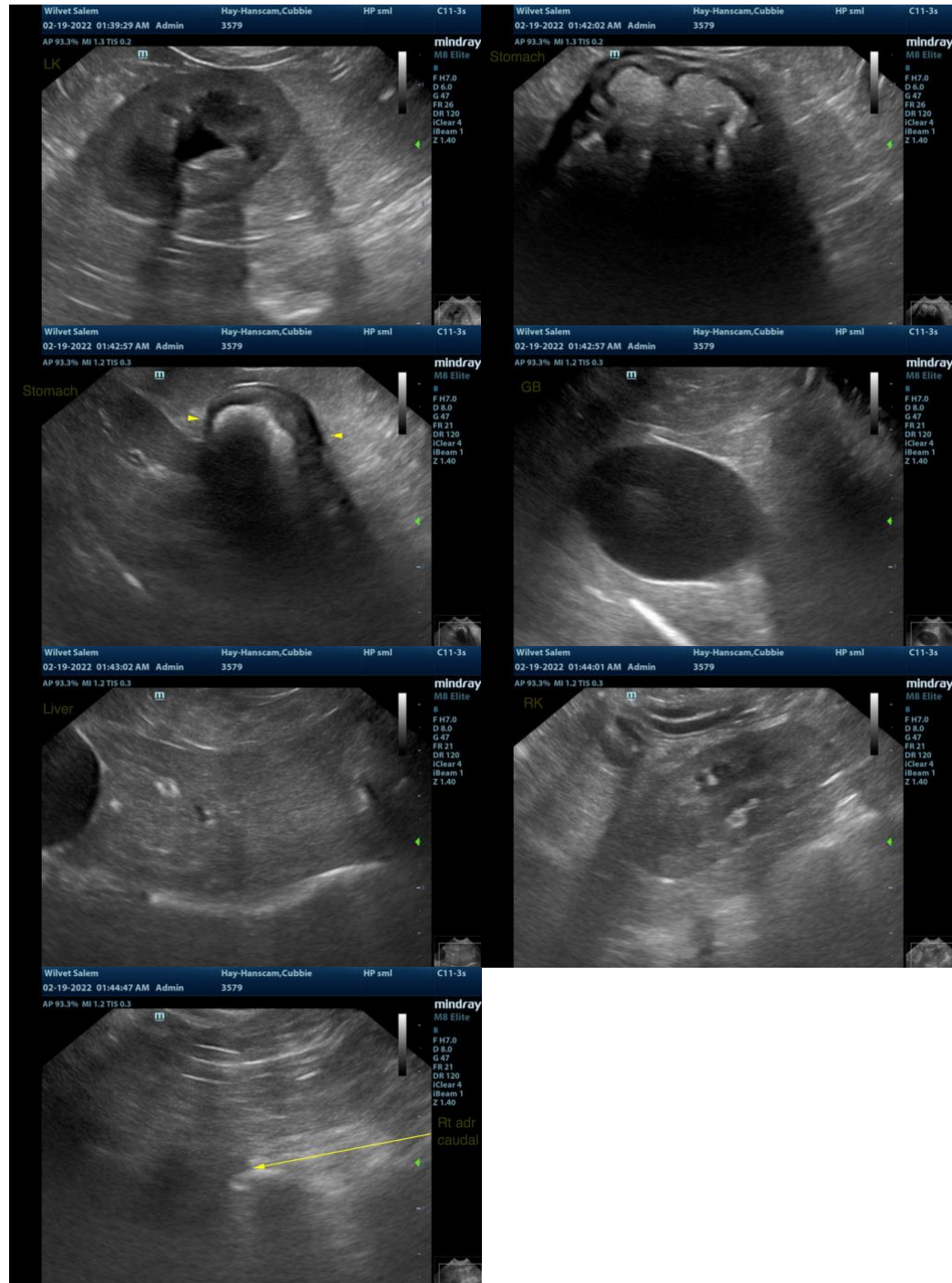
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

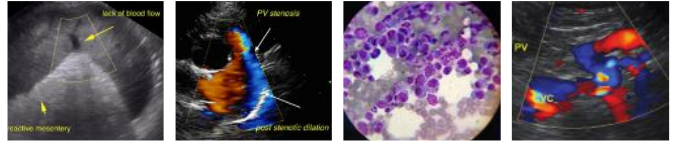
Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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