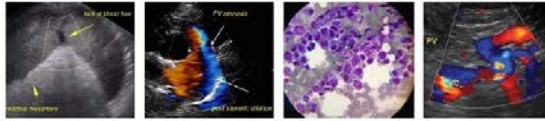




PATIENT	PRESENTING CLINICAL SIGNS
Sadie MacKenzie	Chronic kidney disease, recheck scan from Sept 29, 2021. Wanting to assess progress of disease. Has been drinking a bit more lately and seems always hungry.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.
Scottish Terrier	Kidneys are bilaterally small, irregular and diffusely echogenic with decreased corticomedullary distinction and poor visualization of internal architecture. There is no pyelectasia noted and no mineral is observed. The left kidney measures 4.0 cm. The right kidney measures 3.34 cm.
SEX	Adrenal Glands
Spayed Female	The right adrenal gland is normal in size (1.46 cm long x 1.1 cm at the cranial pole and 0.65 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
AGE	The left adrenal gland is normal in size (1.9 cm long x 0.59 cm at the cranial pole and 0.50 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
7 Years	Spleen
WEIGHT	The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.
10.5 kg	Liver
INTERPRETED BY	Liver is subjectively enlarged (swollen contour) without disruption of architecture. It has a normal homogenous echotexture. Parenchyma is diffusely hyperechoic characterized by less prominent than normal portal vein walls and increased echogenicity relative to the spleen and falciform fat. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.
Beth Johnson, DVM DACVIM	Gastrointestinal
IMAGING PERFORMED BY	The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.
Crystal Hill	REFERRING VET
HOSPITAL NAME	The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.
Wellington AH	INVOICE
REFERRING VET	The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.
Dr. Dennis	DATE
INVOICE	10/18/22
42146	



PATIENT

Sadie MacKenzie

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Pancreas

SPECIES

Canine

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

BREED

Scottish Terrier

Free Abdomen

There is no evidence of free peritoneal effusion noted in these images.

There is no apparent lymphadenopathy noted in these images.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

7 Years

- **Chronic Kidney Disease** - This appearance of the kidneys is consistent with chronic kidney disease such as chronic glomerular or interstitial nephritis, chronic pyelonephritis, etc. There is subjective progression in loss of normal architecture since the ultrasound performed one year ago.
- **Hyperechoic hepatomegaly** - This appearance is non-specific and most consistent with a benign steroid (endocrine) or vacuolar hepatopathy or reactive or idiopathic hepatopathy. Inflammatory and/or infiltrative disease (such as round cell neoplasia) are also possible, but considered less likely.

WEIGHT

10.5 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Given this patient's reported recent polyuria/polydipsia and polyphagia, if not recently evaluated, a complete metabolic evaluation with a CBC/Chem panel, electrolytes, and urinalysis is recommended.

A urine culture is also recommended to rule out an occult urinary tract infection resulting in the acute progression of clinical signs.

Blood pressure is recommended if not recently evaluated.

IMAGING PERFORMED BY

Crystal Hill

If a urinalysis contains protein and an otherwise quiet sediment, a urine protein to creatinine ratio is recommended to quantify the proteinuria and help guide medical management.

HOSPITAL NAME

Wellington AH

REFERRING VET

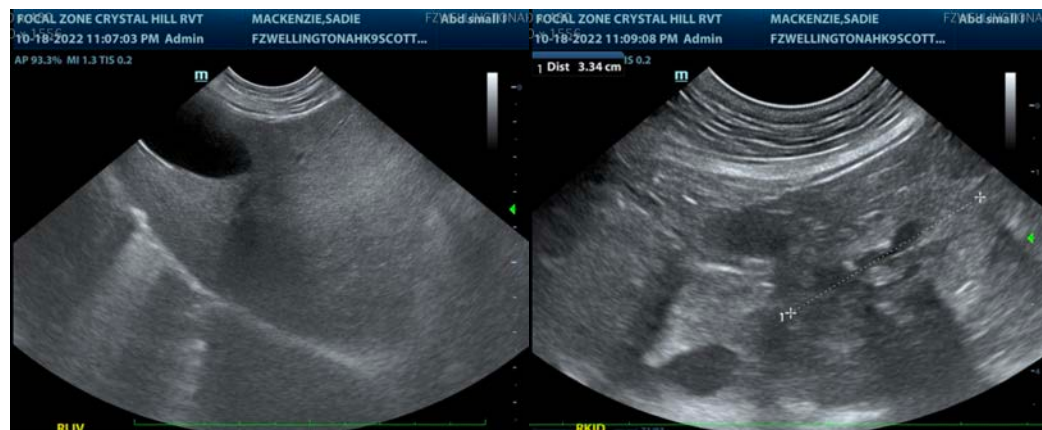
Dr. Dennis

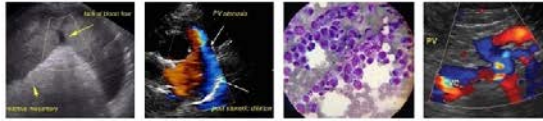
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10/18/22





PATIENT

Sadie MacKenzie

SPECIES

Canine

BREED

Scottish Terrier

SEX

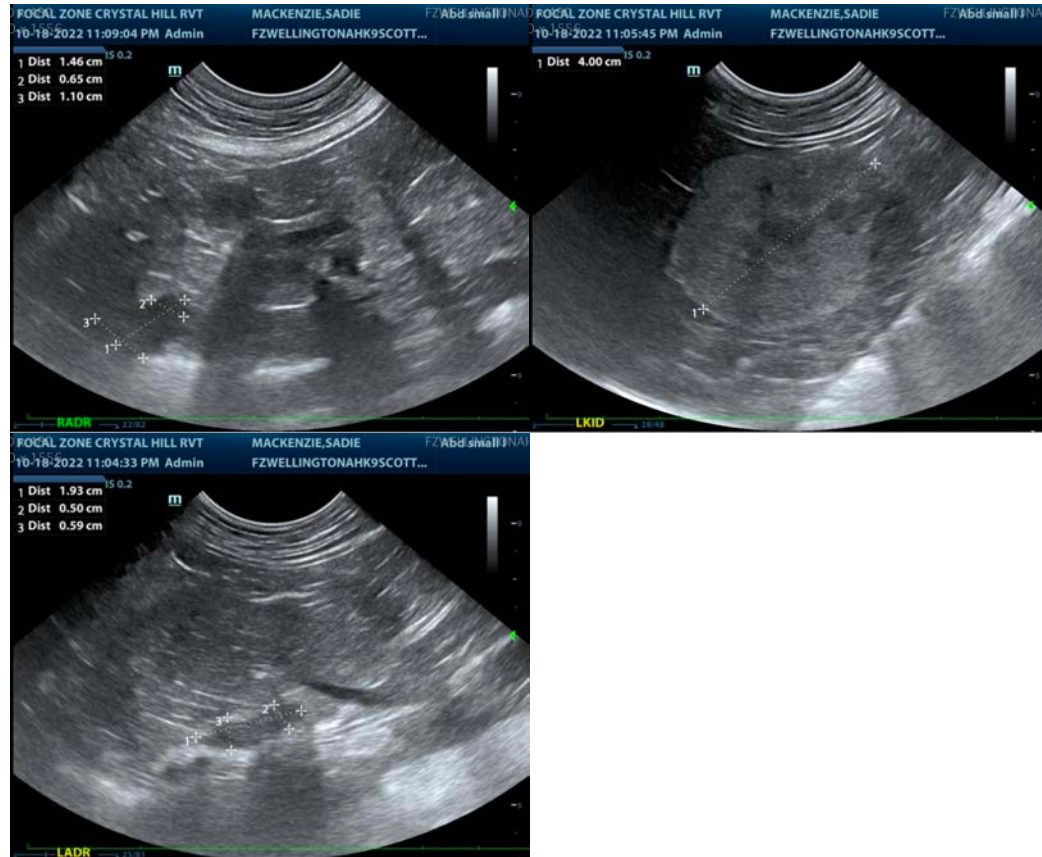
Spayed Female

AGE

7 Years

WEIGHT

10.5 kg



INTERPRETED BY

Beth Johnson, DVM
DACVIM

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.

IMAGING PERFORMED BY

Crystal Hill

Beth Johnson, DVM, DACVIM
Beth.Johnson@sonopath.com

HOSPITAL NAME

Wellington AH

REFERRING VET

Dr. Dennis

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