



**PATIENT**

Popcorn Phillips

**PRESENTING CLINICAL SIGNS**

presented for annual exam 8/21 - no concerns @ home. Scheduled for dental cleaning; pre - op labs showed azotemia and isosthenuria.

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: Obese, otherwise NSF on exam BW: BM: 10-13-21 at 2:08p: CBC: UR Chem: BUN (53), Crea (3.2) UA: USG = 1.019; non - proteinuric; IS

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

DSH

**Urinary System**

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.

**SEX**

Neutered Male

Right kidney is normal in size (3.5 cm) and shape with smooth peripheral margination. There is increased overall echogenicity resulting in a loss of corticomedullary distinction. A 0.3 cm nephrolith is noted within a mildly dilated right renal pelvis.

**AGE**

4 Years

Left kidney is normal in size (3.32 cm) and shape with smooth peripheral margination. There is increased overall echogenicity resulting in a loss of corticomedullary distinction. No mineral appreciated in the left kidney.

**WEIGHT**

12.3 Pounds

**Adrenal Glands**

Right adrenal gland is normal in size (1.02 cm x 0.27 cm at cranial pole and 0.30 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Left adrenal gland is normal in size (1.16 cm x 0.25 cm at cranial pole and 0.32 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**Spleen**

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.

**HOSPITAL NAME**

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**Liver**

Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

**REFERRING VET**

Dr. Marszewski

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.

**INVOICE NUMBER**

26738

**DATE**

10/28/21



**PATIENT** *Gastrointestinal*

Popcorn Phillips 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.

**SPECIES**

Feline

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.

**BREED**

DSH

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

**Pancreas**

**SEX**

Neutered Male

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.

**Free Abdomen**

**AGE**

4 Years

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

**ULTRASONOGRAPHIC FINDINGS**

- Bilaterally hyperechoic kidneys with loss of corticomedullary distinction – consistent with chronic interstitial or glomerular nephritis versus chronic pyelonephritis versus end stage kidney disease with a right nephrolith noted.

**WEIGHT**

12.3 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

Given the mild pyelectasia in the right kidney, recommendations include a urine culture to rule out an occult urinary tract infection followed by empirical antibiotics and diuresis. Recommendations include blood pressure assessment to rule out hypertension secondary to the kidney disease, management with a renal diet followed by close monitoring of blood pressure, proteinuria, secondary infections, etc. that would dictate future changes in therapy. No obvious lower urinary tract or visible obstruction that would warrant the need for surgical intervention in these images. However, given the small nephrolith, routine monitoring for further production of stones and/or movement of stones is recommended.

**HOSPITAL NAME**

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**REFERRING VET**

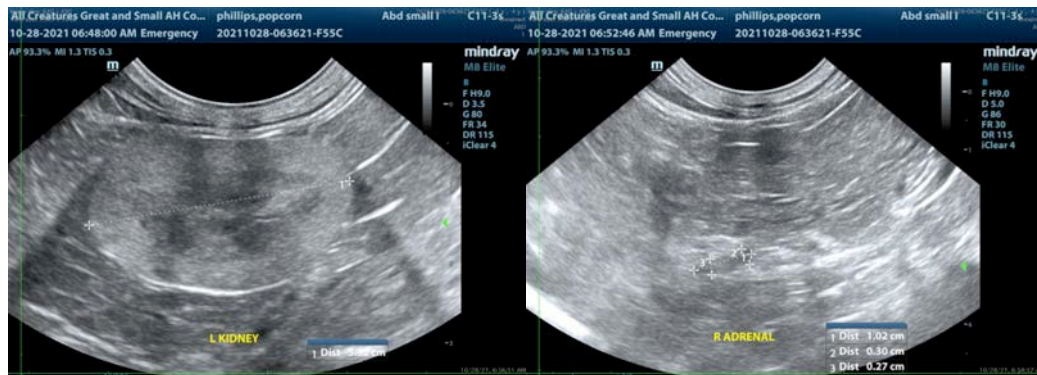
Dr. Marszewski

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**PATIENT**

Popcorn Phillips

**SPECIES**

Feline

**BREED**

DSH

**SEX**

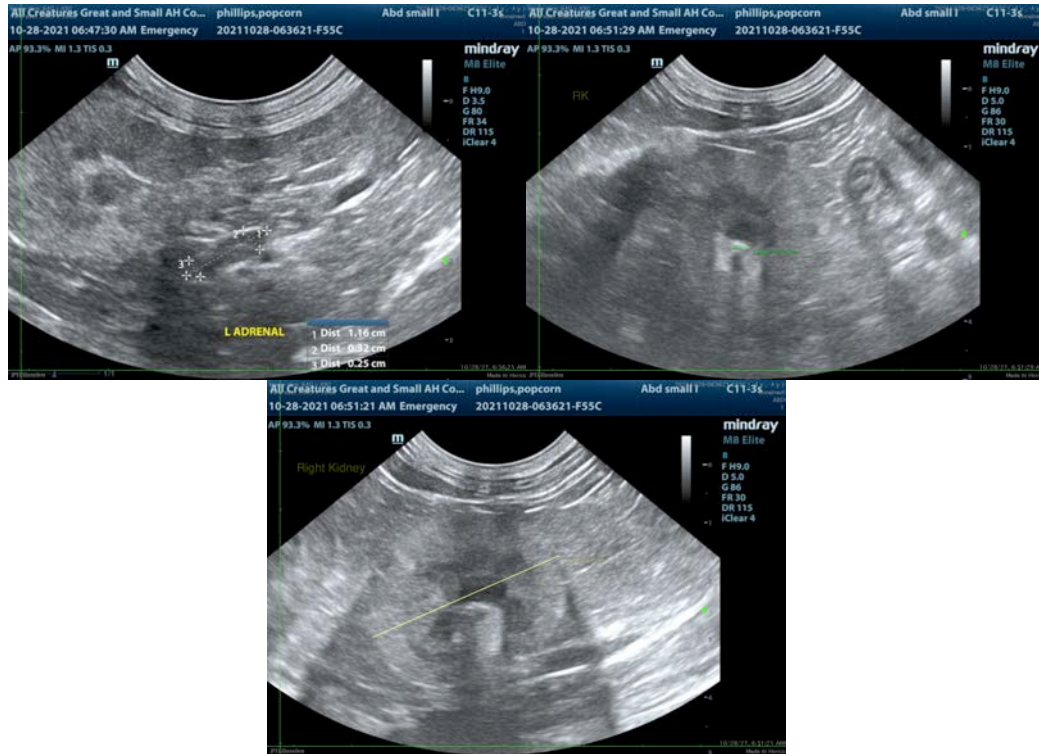
Neutered Male

**AGE**

4 Years

**WEIGHT**

12.3 Pounds



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.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

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.

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

**HOSPITAL NAME**

All Creatures Great & Small Corvallis

**REFERRING VET**

Dr. Marszewski

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