



**PATIENT**

Lola Guthridge

**SPECIES**

Canine

**BREED**

Yorkie X

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

7.44 Pounds

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Dr. Lucas Budden

**HOSPITAL NAME**

Frontier Vet Hospital

**REFERRING VET**

Dr. Lucas Budden

**PRESENTING CLINICAL SIGNS**

Seen recently for a wellness exam. See lab results below. Limited employee pet ultrasound to further assess urinary system due to microalbuminuria.

Abnormal PE/Chem/CBC/UA Results: 6/9/2022 chem/cbc/ua/T4 Chem-triglycerides 387 CBC-nsf T4 2.9, T4 36.8 Heartworm test negative fecal - npf USG 1.050, 2+ protein, 1+ bilirubin; cystocentesis sample UA 6/27/2022 Appearance cloudy USG 1.025 Protein 1+ White blood cell 2-3 Calcium oxalate dihydrate 11-20 Calcium oxalate monohydrate 0-1 Microalbuminuria 4.5 high

**LIMITED ULTRASONOGRAPHIC EXAMINATION**

Urinary bladder is moderately distended. It has a normal uniform wall thickness (<0.2 cm). Contents include primarily anechoic fluid combined with both gravity dependent and suspended echogenic non-shadowing debris within the fluid. Small non-shadowing mineral foci are noted along the dependent wall. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

The right kidney is normal in size (3.16 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia or infarcts observed. Non-obstructive linear multifocal hyperechoic diverticular foci with acoustic shadowing are noted.

The left kidney is normal in size (3.21 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia or infarcts observed. Non-obstructive linear multifocal hyperechoic diverticular foci with acoustic shadowing are noted.

**ULTRASONOGRAPHIC FINDINGS**

- Urinary bladder debris including some mineral sand/debris. Tiny non-shadowing cystoliths along the dependent wall are suspected.
- Bilateral non-obstructive dystrophic mineralization of the kidneys.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- A urine culture is recommended if not recently evaluated.
- A urine protein to creatinine ratio is recommended to further quantify the reported proteinuria.
- Blood pressure is recommended, given the mild proteinuria, if not recently evaluated.
- In the meantime, given the mineral in this patient's bladder and kidneys, transition to a urinary health crystal/stone prevention diet such as Royal Canin Urinary SO or similar could be considered.

**INVOICE**

39272

**DATE**

7/6/22



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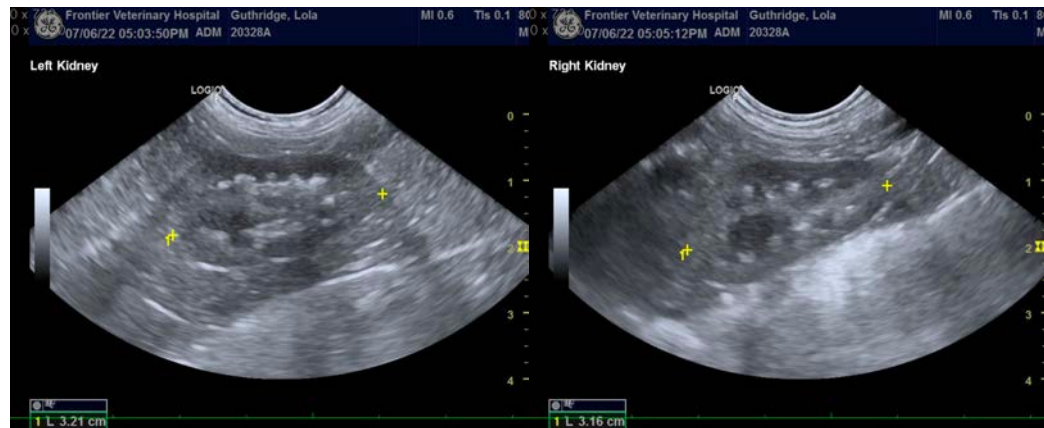
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**IMAGING PERFORMED BY**

Dr. Lucas Budden

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.

**HOSPITAL NAME**

Frontier Vet Hospital

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

**REFERRING VET**

Dr. Lucas Budden

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