



**PATIENT**

Leonard Martin

**SPECIES**

Feline

**BREED**

American Bobtail

**SEX**

Neutered Male

**AGE**

3 Years

**WEIGHT**

17.1

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Emily Kalenius

**HOSPITAL NAME**

Willamette VH

**REFERRING VET**

Dr. Emily Kalenius

**INVOICE**

26607

**DATE**

10/25/21

**PRESENTING CLINICAL SIGNS**

FLUTD / cystitis one month ago. Presented today lethargic, vomiting and with severe hematuria. Abnormal PE/Chem/CBC/UA Results: EPOC CREA 6.68 BUN 78 mg/dl GLU 216, BE -6.6 pCO<sub>2</sub> 42.4 mmHg. UA USG 1.025, Sediment RBC TNTC, WBC 2-3/hpf, No crystals or casts seen. Urine culture pending

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** revealed sand, small calculi, mucus debris, with periserosal inflammatory pattern. Localized areas of free fluid noted. It appears that sand is present in the urethra.

The **kidneys** were bilaterally enlarged. The left kidney measured 4.86 cm. The right kidney measured 5.13 cm. Slight pyelectasia noted. Mild pericapsular inflammatory pattern noted primarily around the right kidney

**Adrenal Glands**

The regions of the **adrenal glands** were unremarkable.

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

**Liver**

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

**Pancreas**

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**ULTRASONOGRAPHIC FINDINGS**

- Obstructive lower urinary tract disease with secondary nephritis



**PATIENT**

Leonard Martin

**SPECIES**

Feline

**BREED**

American Bobtail

**SEX**

Neutered Male

**AGE**

3 Years

**WEIGHT**

17.1

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Emily Kalenius

**HOSPITAL NAME**

Willamette VH

**REFERRING VET**

Dr. Emily Kalenius

**INVOICE**

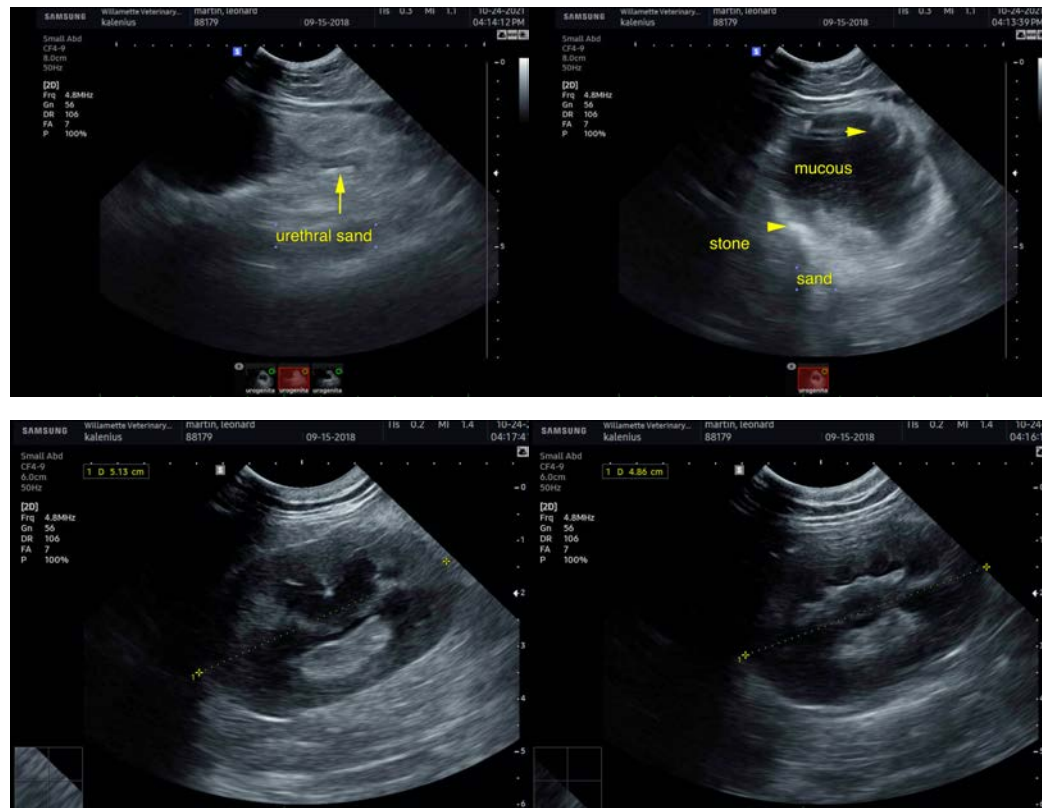
26607

**DATE**

10/25/21

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Cystostomy with normo- and retrograde urethral flushing, examination of the bladder for any possible small rents. IV fluid support and treatment for renal failure recommended. Bladder biopsy and sand analysis and culture indicated.



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.

**Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com**  
[info@SonoPath.com](mailto:info@SonoPath.com)