



PATIENT

Chai Nelson

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Spayed Female

AGE

13 Years

WEIGHT

8 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes, DVM

HOSPITAL NAME

Byrnes VRS, PC

REFERRING VET

Stewarts Mtn. View AH

INVOICE

12054ag

DATE

10/30/22

PRESENTING CLINICAL SIGNS

History: P presented for dental cleaning. Did not perform dental due to abnormal bloodwork and urinalysis. Patient was sedated with Dexdomitor 0.05 ml and Butorphanol 0.05ml. P was started on K/D diet, enalapril, and Pepcid. Plan is for P to come back in 2 weeks to recheck BUN, albumin, and blood pressure.

Abnormal PE/Chem/CBC/UA Results: SDMA 16 (0-14) BUN 87 (9-31) CREA normal TP 4.9 (5.5-7.5) Albumin 1.9 (2.7-3.9) Urinalysis usg 1.037 Pro 500 T4 0.4 (1-4)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra presented normal thicknesses and normal tone to a depth of 2 cm. The ureters were not visible which is normal. No uroliths or sediment were visualized, and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The kidneys revealed moderate degenerative changes with increased cortical echogenicity and remodeling. Occasional cortical cysts were noted. Minor loss of corticomedullary definition and minor pyelectasia were present with pinpoint mineralization. These findings were consistent with non-specific degenerative renal disease. The left and right kidneys both measured 4.0 cm in length.

Adrenal Glands

Both adrenal glands were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.4 cm. The right adrenal gland measured 0.38 cm.

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 from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted.

No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

The gallbladder presented polyploid changes with minor wall thickening and minor luminal debris. The cystic and common bile ducts were normal.

Gastrointestinal



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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.

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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.

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Free Abdomen

A slightly rounded 5 mm lymph node was noted medial to the spleen. This finding was not overtly pathological.

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Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

13 Years

- Non-specific degenerative renal disease
- Age related liver changes
- Polyploid gallbladder changes with minor wall thickening and luminal debris
- Enlarged lymph node medial to the spleen-not overtly pathological

WEIGHT

8 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The kidneys subjectively appear 50-60% compromised. Concern for emerging renal failure in this patient.

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Structurally the GI tract is unremarkable yet microulcerative disease cannot be definitively ruled out. 72-hour IVF protocol to correct the azotemia as well as GI protectants are indicated. Systemic BP measurements are recommended. A baseline cortisol level is warranted to rule out occult Addison's disease although less likely with the bilateral adrenal glands appearing structurally normal. Addison's disease can be a hidden cause of azotemia and low ALB.

IMAGING PERFORMED BY

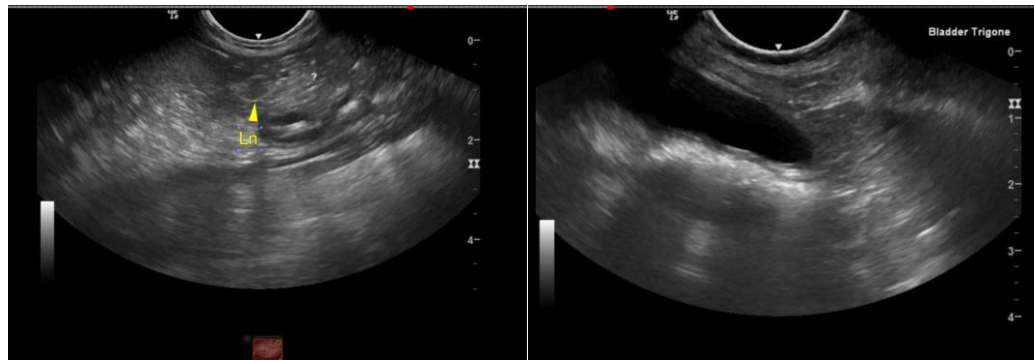
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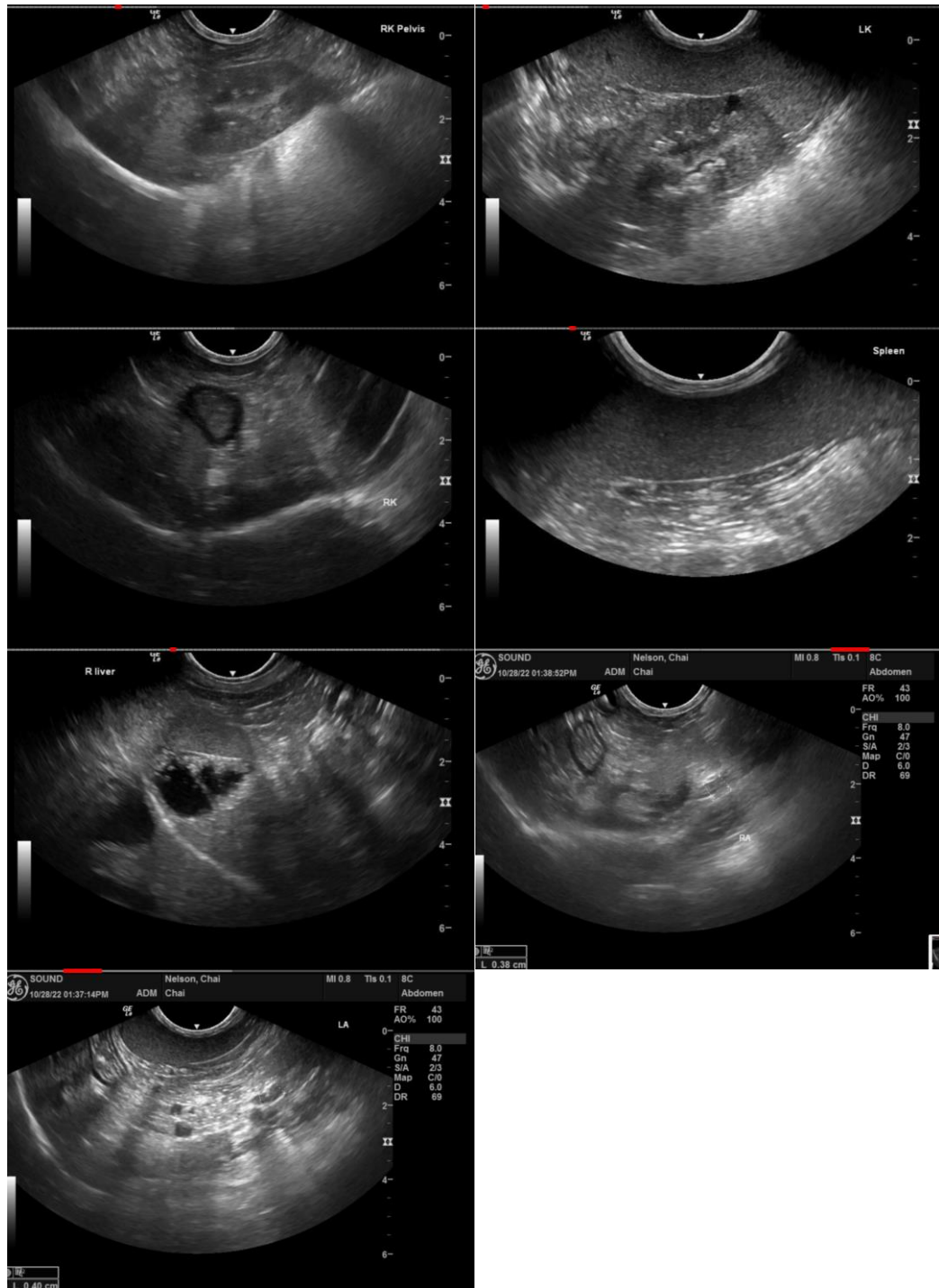
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



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can be of any further assistance please contact me.

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