



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Smokey McHughen	History: Stage 2 CKD - nonproteinuric, hypertensive Scan to determine possible causes of increased WBC Intermittent frank blood in stools for several years - dewormer no help On Semintra SID Hill's wet k/d diet Cerenia as needed for nausea/ appetite Recently finished Clavaseptin 7 day course Abnormal PE/Chem/CBC/UA Results: Moderate neutrophilia Stage 2 CKD - nonproteinuric, hypertensive UA via cysto - usg 1.032, micro clear
<b>SPECIES</b>	
Feline	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Himalayan	<b>Urinary System</b>
<b>SEX</b>	The <b>urinary bladder</b> , trigone, and pelvic urethra presented normal thicknesses and normal tone. 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 was noted. Ureteral papillae were normal.
Neutered male	
<b>AGE</b>	The <b>kidneys</b> revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 3.5 cm with trace pyelectasia. The right kidney revealed cortical infarcts. There was no evidence of active inflammation. The right kidney measured 3.0 cm.
16 years	
<b>WEIGHT</b>	
6.3 kg	
<b>INTERPRETED BY</b>	<b>Adrenal Glands</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	Both <b>adrenal glands</b> 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.
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Dr. Ward	The <b>spleen</b> revealed slight heterogenous changes, yet was normal in size at 0.9 cm.
<b>HOSPITAL NAME</b>	
Kenora VC	
<b>REFERRING VET</b>	<b>Liver</b>
Dr. Ward	The <b>liver</b> is slightly heterogenous with a hypoechoic nodule in the left medial liver. The nodule measured 0.5 cm. The gallbladder was unremarkable.
<b>INVOICE</b>	<b>Gastrointestinal</b>
94356	Examination of the <b>gastrointestinal tract</b> 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.
<b>DATE</b>	
12/7/21	



**PATIENT**

**Pancreas**

Smokey McHughen

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.

**SPECIES**

Feline

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Himalayan

Moderate degenerative renal changes with infarcts, largely expected for this age patient.

Minor hepatic nodule.

**SEX**

Neutered male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA is warranted if any weight loss or liver enzyme elevations are an issue. The degenerative changes are considered moderate. Prerenal episodes may be playing a role in this patient regarding the history of azotemia as the urine specific gravity appears to be adequately concentrated.

**AGE**

16 years

For an additional charge an internal medicine consult can be utilized through [Sonopath.com](http://sonopath.com). You can select the internal medicine drop down at <http://spa.sonopath.com/>.

**WEIGHT**

6.3 kg

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

**INTERPRETED BY**

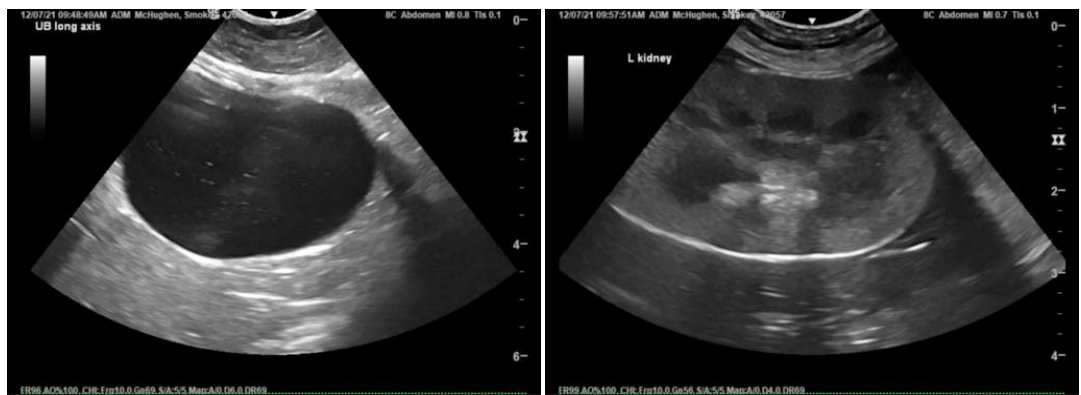
Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ward

**HOSPITAL NAME**

Kenora VC



**REFERRING VET**

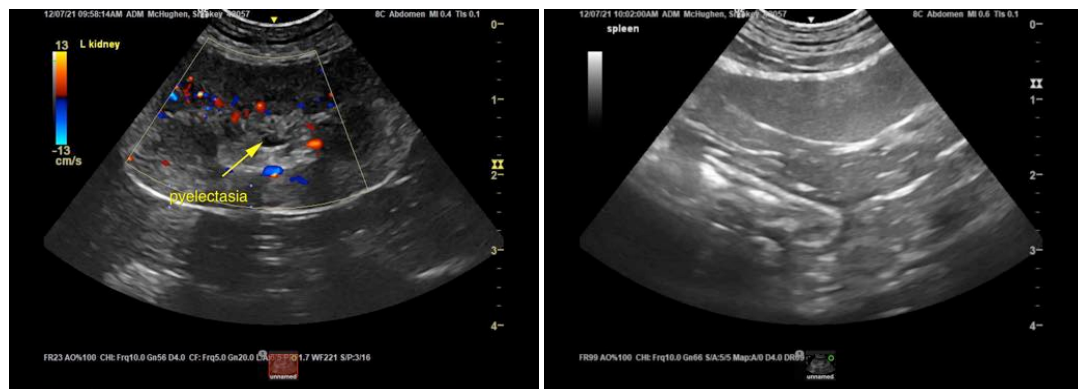
Dr. Ward

**INVOICE**

94356

**DATE**

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**PATIENT**

Smokey McHughen

**SPECIES**

Feline

**BREED**

Himalayan

**SEX**

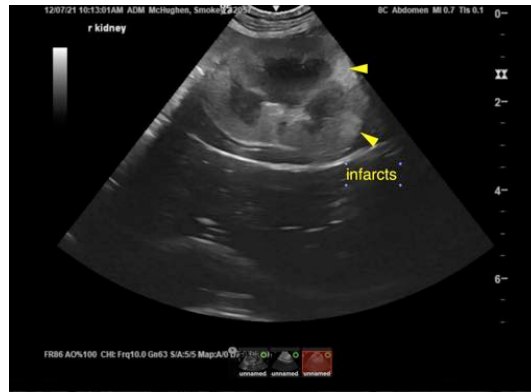
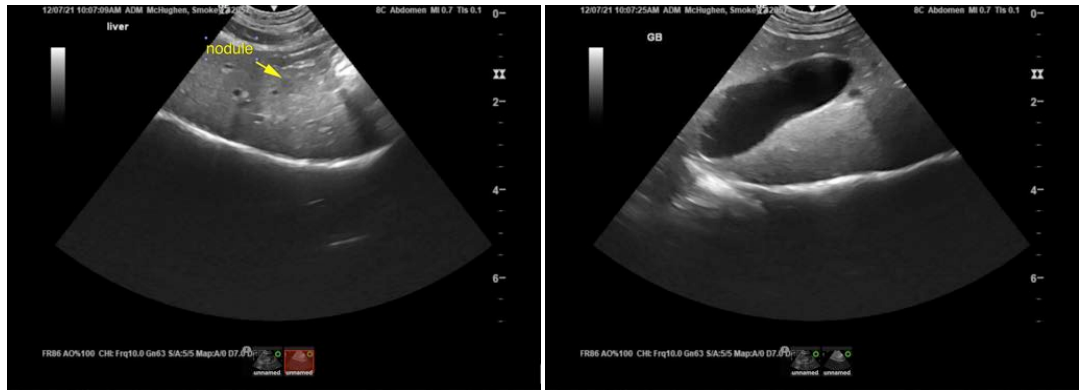
Neutered male

**AGE**

16 years

**WEIGHT**

6.3 kg



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ward

**HOSPITAL NAME**

Kenora VC

**REFERRING VET**

Dr. Ward

**INVOICE**

94356

**DATE**

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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 can be of any further assistance please contact me.

**Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com**  
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