



PATIENT

Bird Vaughan

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

16 years

WEIGHT

6.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

Animal General on Hudson

REFERRING VET

Dr. Ng

INVOICE

96916

DATE

3/15/22

PRESENTING CLINICAL SIGNS

History: Patient presents for recurring, persistent UTI, E. coli. despite antibiotics and multiple cultures. Current med: Convenia.
BUN 41, creat. 2.3, WBC 22.3, neutrophils and monocytes elevated.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and trigone presented normal thicknesses and normal tone. The pelvic urethra was slightly dilated and imaged 3.0 cm beyond the cystourethral junction. 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.

The **kidneys** revealed largely normal size 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 right kidney measured 2.79 cm and was subnormal in size with slight pyelectasia. The left kidney measured 3.41 cm.

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 right adrenal gland measured 0.88 x 0.39 cm at the cranial pole and 0.31 cm at the caudal pole. The left adrenal gland measured 0.4 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 was noted. The spleen measured 0.7 cm.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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. The gallbladder wall was echogenic and mildly thickened.



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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 **pancreas** revealed a dilated duct that measured 0.4 cm.

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ULTRASONOGRAPHIC FINDINGS

Moderate, chronic degenerative renal changes with pyelectasia.

Prominent pancreas.

AGE

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Geriatric abdomen elsewhere.

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recurrent UTI may be owing to infection embedded in the kidneys and may necessitate 4-6 weeks of therapy to potentially clear or pulse antibiotics may be appropriate.

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Feline Chronic UTI Protocol

I recommend **Enrofloxacin** (5-10 mg/kg SID PO) (In patients > 1 year of age) in an adequately hydrated patient without renal failure to avoid complications. This assumes that culture supports this use. Repeat **culture** at 3-4 weeks and continue treatment at least 7-10 days post negative urinary sediment and negative culture. *Note: Negative culture does not necessarily mean lack of UTI especially with elevated urinary WBC with low urine specific gravity.* Other favorite antibiotics for chronic UTI include Zithromax 50mg/cat SID or potentiated bet lactam antibiotics.

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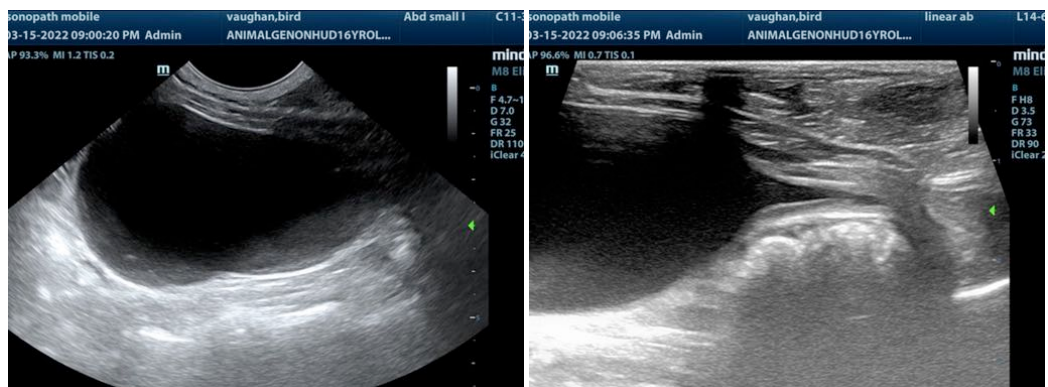
Dr. Ng

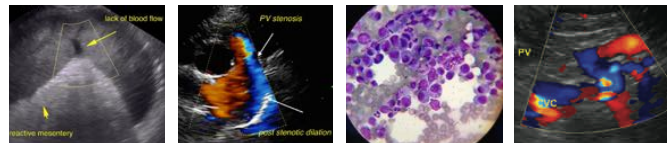
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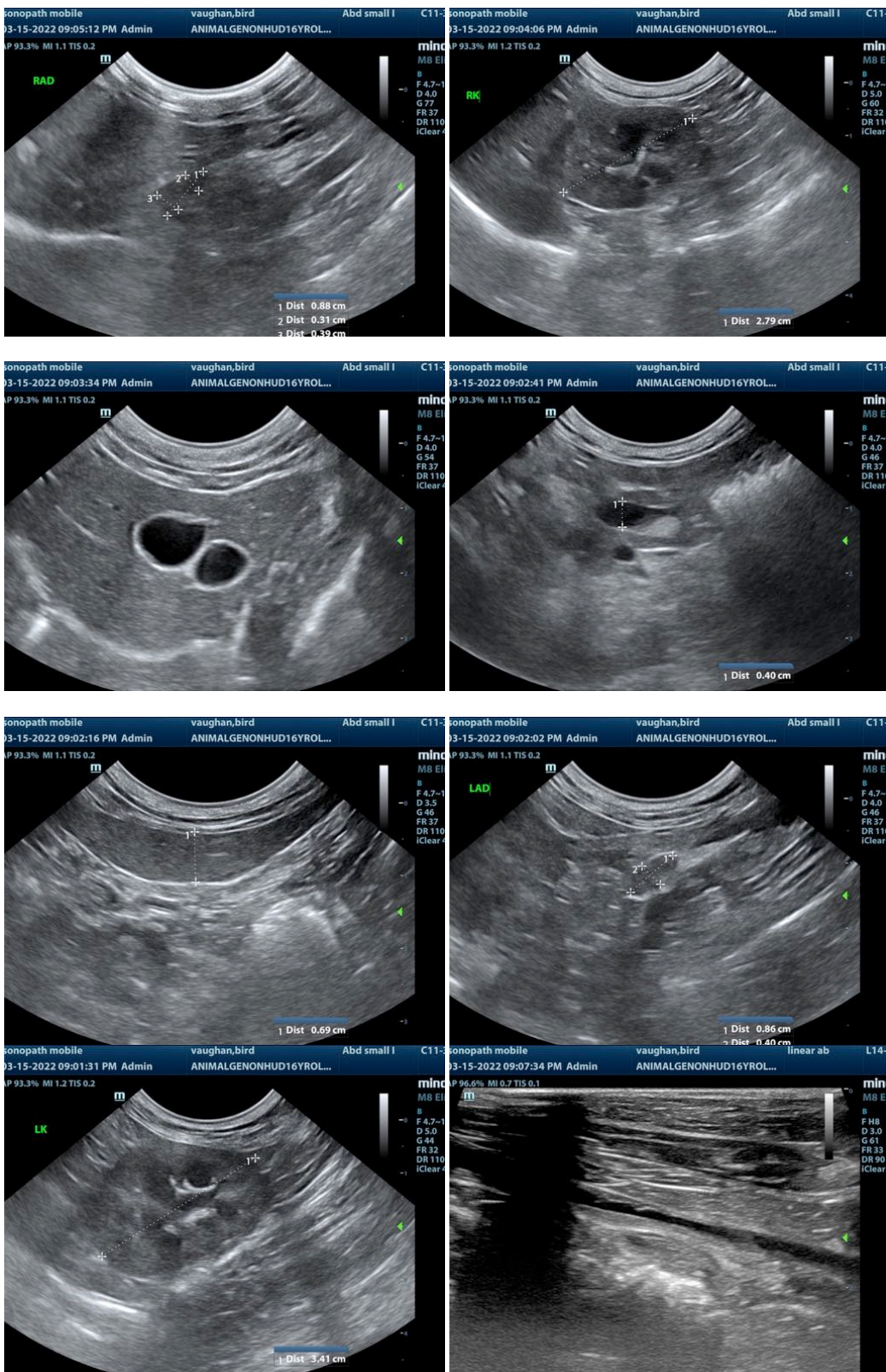
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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Info@SonoPath.com

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