



PATIENT

Winnie Miller

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

14 Years

WEIGHT

5.48 kg

INTERPRETED BY

Eric Lindquist, DMV,
DABVP (CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Dr. Singh

HOSPITAL NAME

Balmy Beach Pet
Hospital

REFERRING VET

Dr. Singh

INVOICE

73883

DATE

3/20/26

PRESENTING CLINICAL SIGNS

UTIs. High blood sugars, though Fructosamine is normal - was started on insulin (Lantus) 1.5 u twice daily due to presumed diabetes as the cause of her pu/pd and hematuria, UTIs. No ketones in urine. Appetite is reduced and lethargic since being started on insulin

Abnormal PE/Chem/CBC/UA Results: CBC shows neutrophilia with left shift Chemistry shows marked hyperglycemia U/A shows pyuria Abdominal u/s shows enlarged adrenals with some calcification (incidental), do we need to consider Cushings? skin is thin and fragile. hair growth very slow to absent from sites that have been shaved.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented multifocal to concentric wall thickening measuring up to 0.64 cm, occupying the ventral and dorsal wall and into the cystourethral junction and proximal urethra.

Only one **kidney** was visualized, presumed to be the left kidney, which presented a cortical infarct at the dorsal cortex with cortical collapse. The kidney measured 4.3 cm.

Adrenal Glands

The **left adrenal gland** was enlarged, hypoechoic and irregular, measuring 0.60 cm x 0.76 cm, with mineralization noted.

The **right adrenal gland** was slightly mineralized, measuring approximately 5.0 mm.

Spleen

The **spleen** was not visualized.

Liver

One image of the **liver** provided. The image did not reveal any gross pathology.

Gastrointestinal

The visible **gastrointestinal tract** was unremarkable.

Pancreas

The visible **pancreas** was unremarkable.

ULTRASONOGRAPHIC FINDINGS

- Slight irregular left adrenal gland with dystrophic mineralization of both adrenal glands.
- Renal infarct.
- Bladder wall thickening.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Limited image set provided. Serial blood pressures warranted in this patient. If hypokalemia is present, then aldosterone level warranted to assess if the left adrenal may represent a Conn's syndrome manifestation. Recommend medically treating for UTI. The bladder presentation is consistent with chronic cystitis or possible pseudomembranous cystitis. Bladder neoplasia such as bladder lymphoma or



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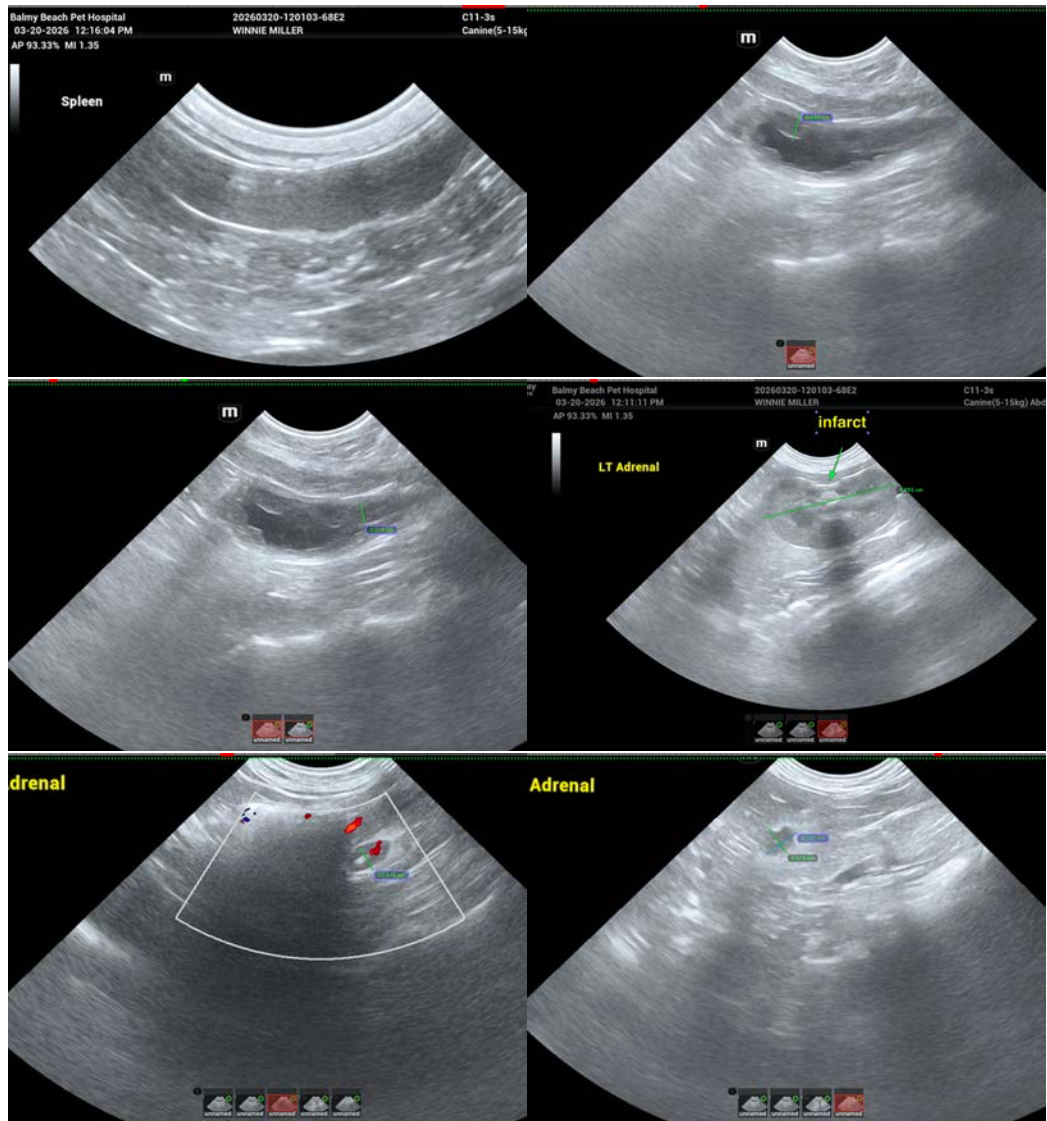
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carcinoma cannot be ruled out. Cytospin of a free catch urine sample would be ideal to assess for any neoplastic cells.

**Please follow SDEP type image protocol or similar for thoroughness, as there are multiple regions in this abdomen that are not imaged adequately to ensure further pathology is not present.*





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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.

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(CFM), Cert. IVUSS,
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