

PATIENT

Sparky Lomsnes

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Neutered male

AGE

13 years

WEIGHT

4.56 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Biederbeck

HOSPITAL NAME

Lomsnes VH

REFERRING VET

Dr. Biederbeck

INVOICE

31870

DATE

7/21/22

PRESENTING CLINICAL SIGNS

History: For the past 3-4 days is hyperesthetic, reactive, hiding, vocalizing, but eating well, no v/d, normal urination. Ate large amt this morning despite severely elevated renal values and being very lethargic Gave gabapentin 100mg PO last night to help with hyperesthesia and is now severely lethargic, 36.4 temp Had gabapentin 100mg PO last night, no other medications Goes in yard but doesn't go far, no fertilizers etc.
Abnormal PE/Chem/CBC/UA Results: Elevated kidney values (SDMA 32, CREA 5.6, BUN 81, Phos 9.3) and Chol 294 . Remainder of chem incl Ca normal (Ca- 10.3 (7.8-11.3)). CBC normal. USG 1.024, RBCs on micro exam - otherwise NSF Is on HP Renal diet long term due to allergies and in past had stage 1 renal disease Flushing him on IV fluids now

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction and appeared 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 **right kidney** pyelectasia that measured 1.0 x 0.5 cm. The right ureter was dilated to approximately 0.6 cm and appeared to be strictured approximately 1.0 cm distal from the right renal pelvis. Moderate degenerative right renal changes were present. The right kidney revealed echogenic debris, which is suggestive for pyelonephritis. Pelvic calculi was noted in the right renal pelvis, yet the distal ureter is likely strictured from passage of calculi. Active infarcts were noted in the right kidney.

The left kidney was subnormal in size with significantly dystrophic changes with interstitial nephrosis and irregular contour with minor pyelectasia. The left kidney measured 2.45 cm. This is likely end stage process of the active process in the right kidney.

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.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself caudally. This is a positional variant and is not pathological. There was no evidence of significant disease.

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



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lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Hairball density was noted in the stomach. 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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ULTRASONOGRAPHIC FINDINGS

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Subjectively end stage left kidney dystrophic changes and interstitial nephrosis pattern.

Pyelectasia and obstructive nephrolithiasis and strictured proximal ureter in the right kidney.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SUB device for the right kidney would be ideal in this patient. Nephrotomy could be considered with removal of the calculi. However, this can carry traumatic side effects. 72 hour IV fluid protocol and stabilization for SUB placement or right nephrotomy and ureteral liberation would be ideal. Prognosis is guarded. Ureteral stent placement is also an alternative.

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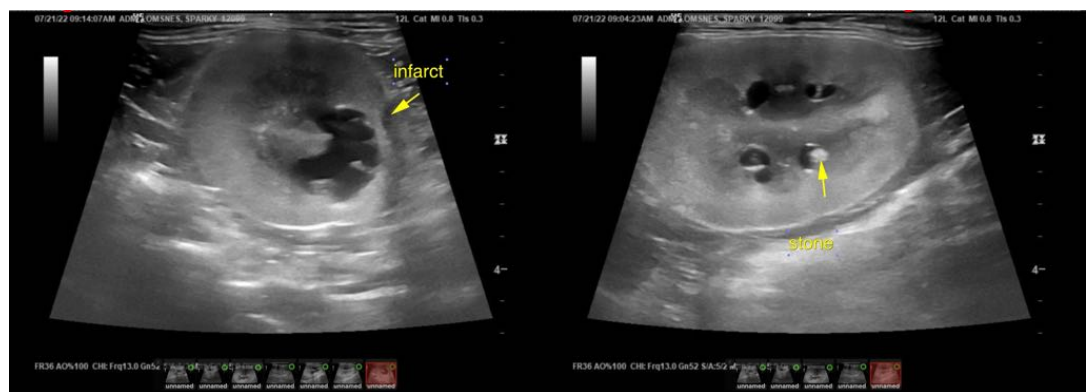
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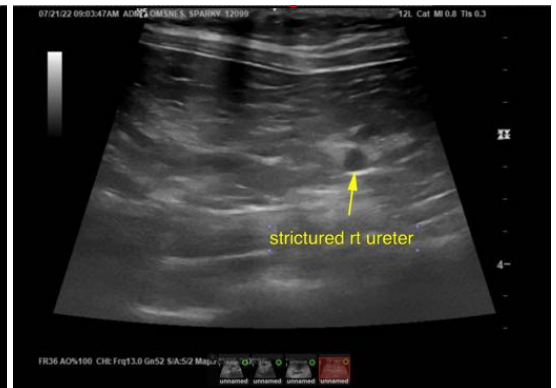
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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