



PATIENT

Hailey Meyers

SPECIES

Feline

BREED

DLH

SEX

Spayed Female

AGE

15

WEIGHT

4.3

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Diane McKelvey

HOSPITAL NAME

Aberdeen VH

REFERRING VET

Dr. Diane McKelvey

INVOICE

36129

DATE

3/6/26

PRESENTING CLINICAL SIGNS

- Acute progressive renal failure over past 4 weeks
- Constipated and had enema today, prior to ultrasound
- Urinalysis - unremarkable sediment, usg 1.014
- On Marbofloxacin for suspected pyelonephritis
- Abnormal PE/Chem/CBC/UA Results: Creatinine 696umol/L March 6, up from 382umol/L on March 2nd

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder is moderately distended with anechoic urine. No uroliths are seen. The bladder wall is normal in appearance and thickness. No masses are seen. The urethral papilla is not clearly seen.

The left kidney presents marked loss of corticomedullary distinction. Mild pyelectasia is noted, renal pelvis measures 2.9 mm in width. There is hyperechoic fat surrounding the left renal pelvis. The left kidney was normal in size (3.8 cm in length).

The right kidney is slightly small in size (2.8 cm in length). The right kidney has mild loss of corticomedullary distinction. The right renal pelvis is also dilated at 2.8 mm in width. There is mild hyperechoic fat surrounding right renal pelvis.

Adrenal Glands

The left and right adrenal glands were not seen.

Spleen

The spleen is normal in size, shape, margination and echogenicity. No masses are seen.

Liver

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern.

The gallbladder presents normal size with anechoic contents. Normal gallbladder wall. No evidence of bile duct distention or obstruction.

Gastrointestinal

The stomach and intestines have normal wall layering and thickness. Fluid filled segment of colon was present, reported to be due to recent enema that was given. There are segments of colon that still contain a large amount of firm stool. Patient appears to still have some degree of constipation present.

Pancreas

The right limb of the pancreas appears normal. The left limb is not clearly visualized.



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Free Abdomen

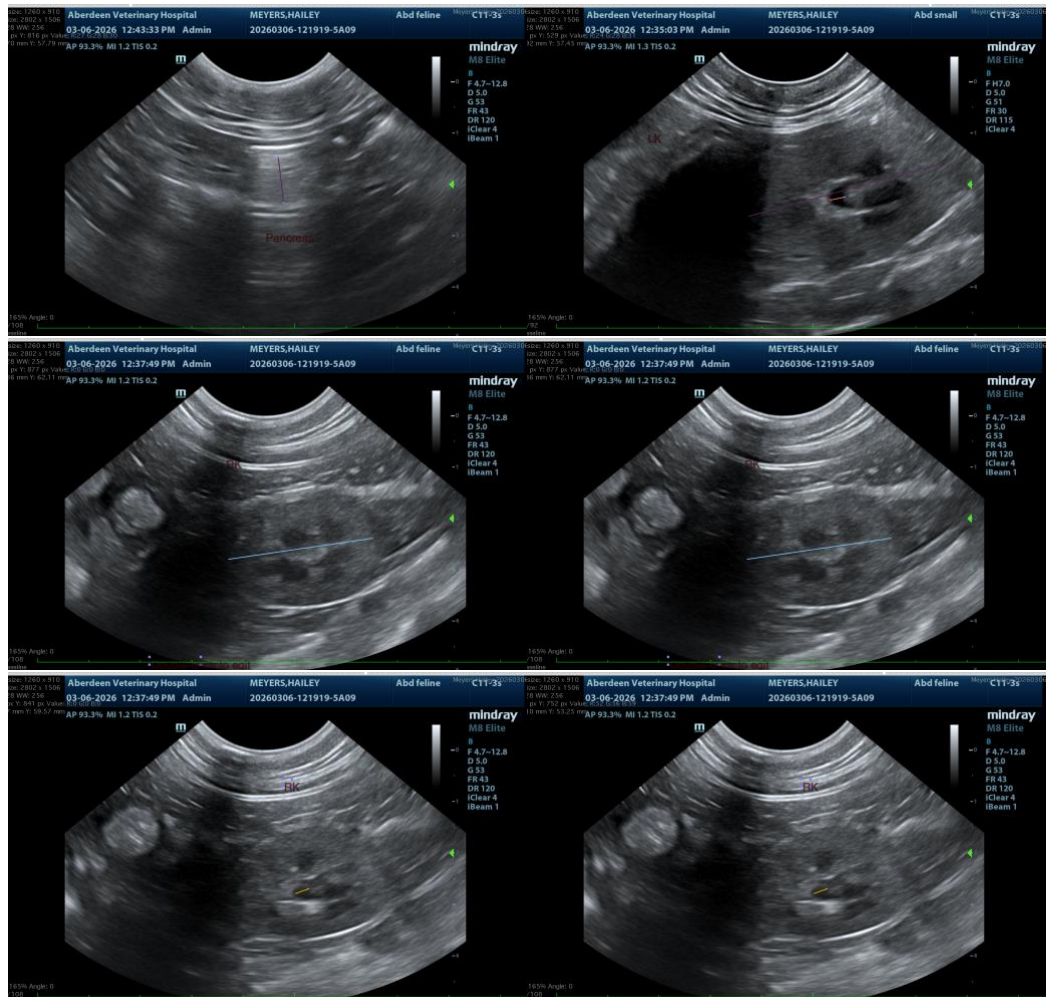
There are no enlarged abdominal lymph nodes seen on this exam. No free abdominal fluid is seen.

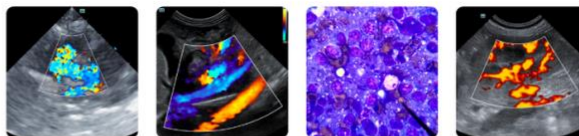
ULTRASONOGRAPHIC FINDINGS

- Bilateral decreased corticomedullary distinction and renal pelvic dilation. Patient appears to have chronic kidney disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend full renal staging, monitoring, and managing per International Renal Interest Society guidelines. Evidence of the dilated renal pelvis supports a possible diagnosis of pyelonephritis. Recommend 4 weeks of antibiotic treatment. The marbofloxacin that is being used is an excellent choice. 3-5 days after the last dose of marbofloxacin, submit a urine culture to confirm urine is sterile. Obtain a blood pressure to rule out hypertension as a cause of renal disease, and if a T4 has not been checked, consider checking T4 to rule out hyperthyroidism as a possible cause of renal disease. Prognosis is guarded at this time, pending response to treatment and determination if renal function can be recovered at this time or not.





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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.

Greg Kuhlman, DVM, DACVIM (SAIM)

Veterinary Internal Medicine Specialist

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