



PATIENT	PRESENTING CLINICAL SIGNS
Boo Wallwork	presented for stranguria, had been ongoing for 2 weeks, suspect FLUTD, treated for vomiting in July, down 2kg in weight since currently on onsiar, clavaseptin
SPECIES	Abnormal PE/Chem/CBC/UA Results: CBC/Chem-WNL
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	The urinary bladder was subnormal in size owing to a lack of urine distention. Full evaluation of the urinary bladder walls was limited owing to lack of urine distention. The ventral urinary bladder wall width measured 0.43 cm in width. No overt evidence of calculi was noted. The urethra exhibited normal structure and tone to a depth of 2.0 cm.
SEX	
MN	The area of the aortic trifurcation was free of pathology.
AGE	Both kidneys were enlarged in size with generalized Increased corticomedullary echogenicity and marked loss of corticomedullary border demarcation. Subjective reduced medullary volume was present along with bilateral moderate pyelectasia. No evidence of concurrent left or right ureter dilation was evident. The fluid within the moderately dilated renal pelvis was primarily anechoic without an overt cellular component. Concurrent bilateral retroperitoneal fluid and increased retroperitoneal tissue echogenicity associated with both kidneys were present. The left kidney measured 5.3 cm in length. The right kidney measured 5.3 cm in length.
6 years	
WEIGHT	
4 kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.38 cm width.
IMAGING PERFORMED BY	Spleen
Kelly Reschny	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.69 cm in width.
HOSPITAL NAME	Liver/ Gallbladder
New Hamburg VC	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Schroeder	
INVOICE	Gastrointestinal
13008	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.30 cm.
DATE	
1/10/22	



PATIENT	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The jejunum wall width measured 0.22 cm.
Boo Wallwork	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Feline	Pancreas
BREED	The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.
DSH	Free Abdomen
SEX	Focal midabdominal mesenteric lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 1.5 cm x 0.54 cm.
MN	
AGE	ULTRASONOGRAPHIC FINDINGS
6 years	Primary Findings
WEIGHT	<ul style="list-style-type: none"> • Bilateral marked chronic nephropathy exhibiting moderate pyelectasia and associated retroperitoneal inflammation / effusion • Subnormal urinary bladder, suspect chronic cystitis • Overtly normal gastrointestinal tract • Focal, subjectively benign / reactive mesenteric lymph node
4 kg	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP	Marked bilateral renal changes and renomegaly suggestive of nonspecific, chronic nephropathy or nephritis were present. Chronic to potentially acute on chronic pyelonephritis and interstitial nephritis are possible while the potential for renal neoplasia such as lymphoma cannot be excluded. Assuming normal clotting status, ultrasound-guided FNA of the left or right renal cortex using a 25-gauge needle could be considered for screening cytology. Reassessment of the full urinary bladder would be ideal. Full urinary workup including culture and sensitivity and baseline UPC on a sterile urine sample if possible is recommended.
IMAGING PERFORMED BY	
Kelly Reschny	
HOSPITAL NAME	
New Hamburg VC	
REFERRING VET	If recent lab work, the lack of azotemia in this patient is somewhat unexpected. Serial monitoring for emerging azotemia is suggested.
Dr. Schroeder	
INVOICE	A GI panel to include PLI/TLI/Cobalamin/Folate and three view chest radiographs to rule out occult pathology as a potential cause of weight loss may be considered.
13008	
DATE	
1/10/22	



PATIENT

Boo Wallwork

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

6 years

WEIGHT

4 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

New Hamburg VC

REFERRING VET

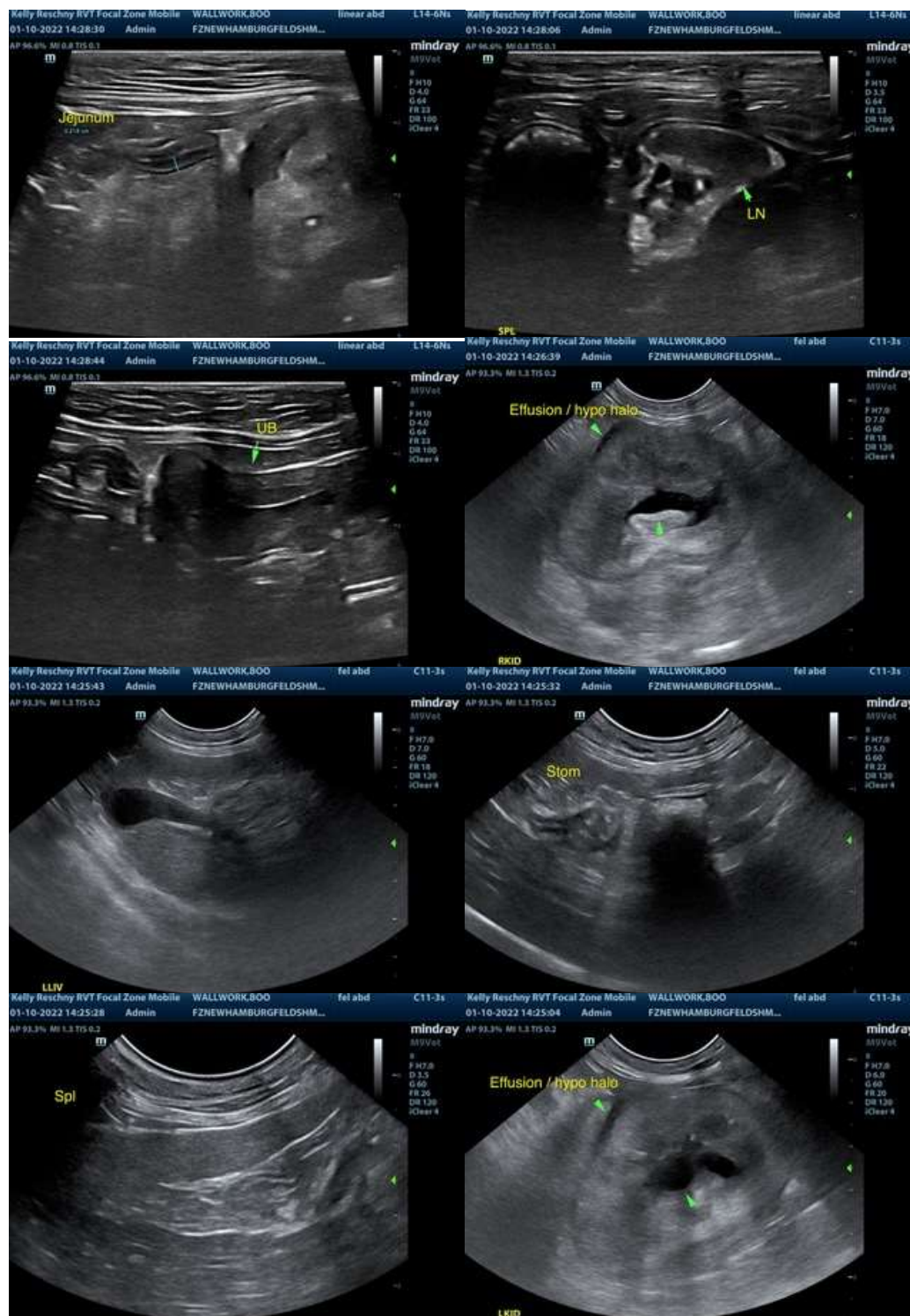
Dr. Schroeder

INVOICE

13008

DATE

1/10/22





PATIENT

Boo Wallwork

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.

SPECIES

Feline

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.

BREED

DSH

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

MN

AGE

6 years

WEIGHT

4 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

New Hamburg VC

REFERRING VET

Dr. Schroeder

INVOICE

13008

DATE

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