



**PATIENT PRESENTING CLINICAL SIGNS**

Bailey Denny Treated for UTI with enrofloxacin. In today for recheck UA after completion of meds. UA showed infection much improved but large amount of RBC.

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Feline

**Urinary System**

BREED

The urinary bladder was subnormal in size owing to lack of urine distension which prohibited full evaluation of the urinary bladder walls. Mild prominent ventroapical and dorsal bladder walls extending into the area of the trigone and cystourethral junction were present. The urinary bladder wall measured 0.2 cm in width. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of neoplastic changes was noted.

DSH

SEX

FS

AGE

10yr

The left kidney exhibited borderline subnormal size, asymmetric contour with areas of increased cortex echogenicity to potential cortical mineralization and mild pyelectasia. The left kidney measured 3.2 cm in length.

WEIGHT

8.5lb

Normal size and asymmetrical margination were present in the right kidney with discrete areas of increased cortex echogenicity, pinpoint medullary mineral and minor pyelectasia. The right kidney measured 3.9 cm in length.

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

**Adrenal Glands**

No obvious pathology was present in the area of the bilateral adrenal glands.

**Spleen**

IMAGING PERFORMED BY

Sara Hansen

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 0.67 cm in width at the level of the hilus.

HOSPITAL NAME

Countryside Animal  
Clinic

**Liver**

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.

REFERRING VET

Dr. Cox

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

INVOICE

11867ag

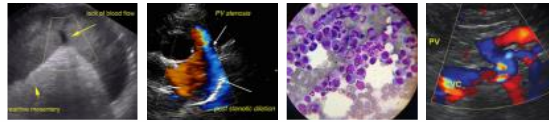
**Gastrointestinal**

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.

DATE

10/14/2022

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.



**PATIENT**

Normal visible colon wall layers were present with apparent formed feces in lumen.

Bailey Denny

**Pancreas**

**SPECIES**

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 was evident.

Feline

**BREED**

**Free Abdomen**

DSH

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**SEX**

**ULTRASONOGRAPHIC FINDINGS**

FS

- Suspect mild persistent cystitis
- Bilateral non-specific chronic renal changes exhibiting focal cortex mineralization potentially indicative of chronic cortical infarcts, minor bilateral pyelectasia

**AGE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

10yr

The renal pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage or mild pelvis dilation potentially owing to chronic renal changes while the possibility of low-grade possibly resolving pyelonephritis cannot be definitively excluded. Assessment of and monitoring renal parameters is recommended. Recheck urine C/S 5-7 days post completion of antibiotic is suggested.

**WEIGHT**

8.5lb

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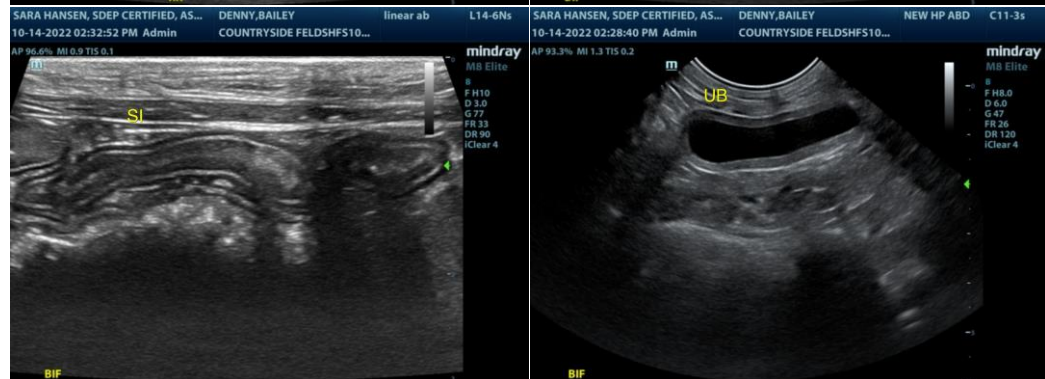


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**HOSPITAL NAME**

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**REFERRING VET**

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**PATIENT**

Bailey Denny

**SPECIES**

Feline

**BREED**

DSH

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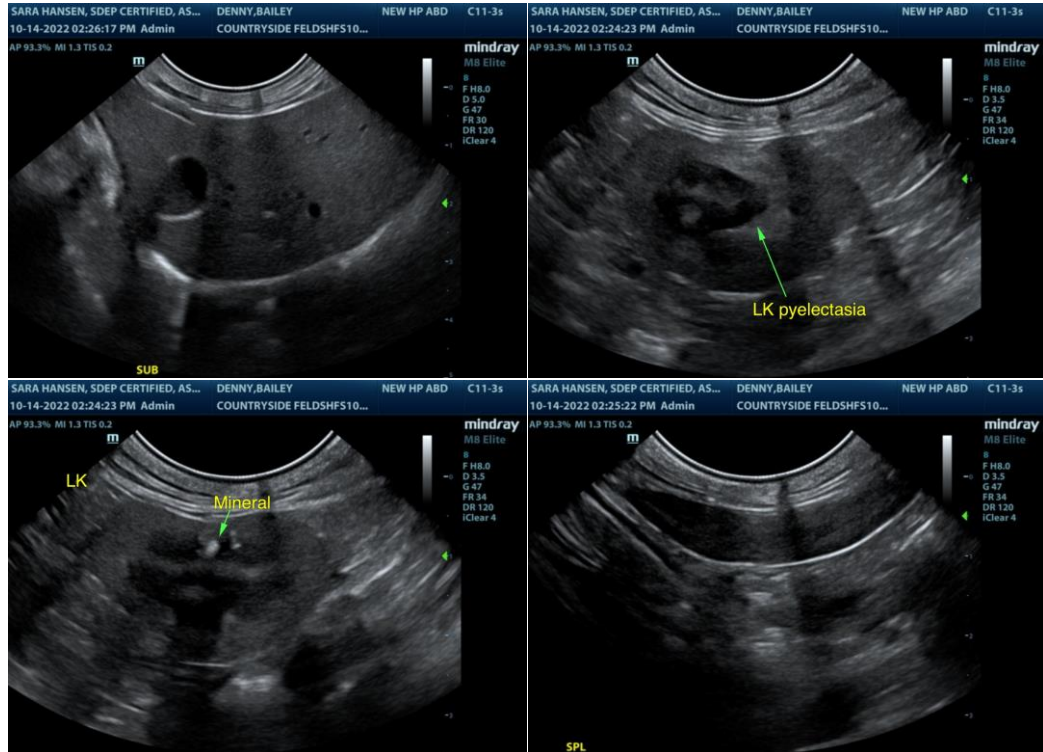
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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