**PATIENT**

Thunder Laufenberg

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

8.1 Pounds

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING PERFORMED BY**

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VETDr. Bittner –
Mukwonago AH**INVOICE**

42280

DATE

10/21/22

PRESENTING CLINICAL SIGNSPresented for defecating issues. Hospitalized for renal failure
Abnormal PE/Chem/CBC/UA Results: Bun 130 SDMA 93 Alp 11 FPL abnormal**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder was normal in size and tone with primarily anechoic urine. Minor dependent sediment/sand noted, which may indicate cellular debris/protein, crystalline debris, mucus, or minor mineral. The urethra was normal to a depth of 2.0 cm.

The area of the aortic trifurcation was free of pathology.

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced.

The left kidney exhibited non-obstructive areas of medullary mineral. An ill-defined non-homogeneous mass lesion was present peripherally around the left kidney and potentially within the left retroperitoneal space. The left kidney including the ill-defined peripheral mass measured 3.7 cm length. Discernable left kidney measured 3.2 cm length.

The right kidney presented medullary mineral with solitary mid medullary renolith measuring 0.94 cm diameter. Mild hydronephrosis present in the right kidney without evidence of right ureter dilation. The right kidney measured 4.5 cm. No evidence of right retroperitoneal pathology.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.56 cm.

Spleen

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.

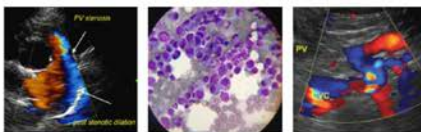
Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.

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.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor segmental ileus noted to the level of the ileocolic junction. Small intestinal wall measured 0.25 cm. Ileocolic wall measured 0.32 cm.

**PATIENT**

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

Thunder Laufenberg

Pancreas

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.

SPECIES

Feline

Free Abdomen**BREED**

No overt free fluid.

DSH

ULTRASONOGRAPHIC FINDINGS**SEX**

Neutered Male

- Left kidney chronic interstitial nephrosis renal pattern with non-obstructive medullary mineral, ill-defined peripheral left kidney to possible left retroperitoneal mass lesion.
- Right kidney chronic interstitial nephrosis renal pattern with medullary mineral/renolithiasis and mild hydronephrosis, possible emerging obstructive renolithiasis.
- Mild hepatic parenchymal remodeling – subjectively benign.
- Mild dependent urinary bladder sediment/sand
- Overtly normal colon

AGE

14 Years

WEIGHT

8.1 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine culture and sensitivity on sterile urine sample +/- baseline UPC level if no evidence of significant inflammatory sediment for further renal staging recommended. Potentially, this patient may be passing small amounts of mineral from the kidneys into the urinary bladder.

INTERPRETED BY

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

No sonographic evidence of active pancreatitis, although low-grade or chronic pancreatitis possible if evidence of gastrointestinal signs.

IMAGING PERFORMED BY

Kim Liedberg

Renal prognosis is likely dependent on response to diuresis protocol and CKD therapy with monitoring of azotemia going forward. However, given the appearance of the bilateral kidneys, guarded to very guarded prognosis indicated.

HOSPITAL NAME

SVS Imaging WI

Assuming normal clotting status, FNA cytology of the ill-defined peripheral left kidney to left retroperitoneal mass may be considered for further assessment.

REFERRING VET

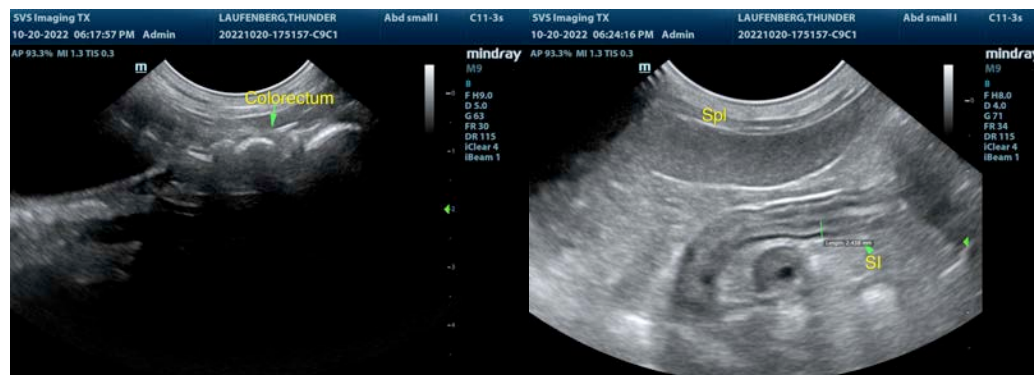
Dr. Bittner –
Mukwonago AH

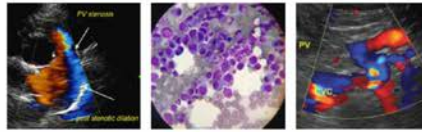
INVOICE

42280

DATE

10/21/22





PATIENT

Thunder Laufenberg

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

8.1 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

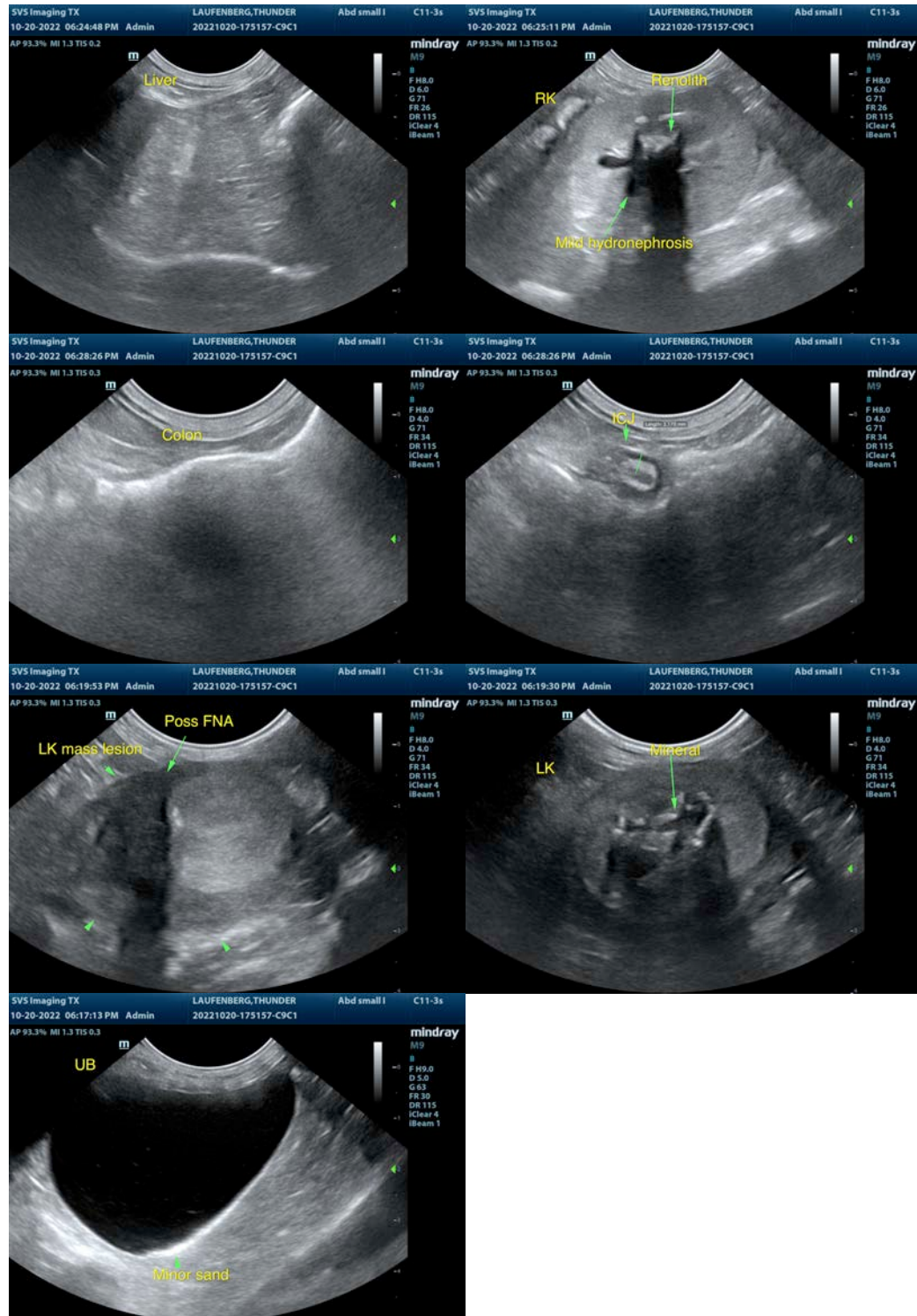
Dr. Bittner –
Mukwonago AH

INVOICE

42280

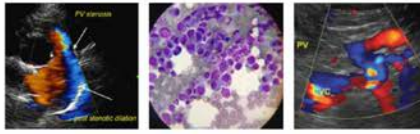
DATE

10/21/22



IMAGING PERFORMED BY

SVS Mobile Imaging 262-366-5970
fredgromalak@gmail.com



EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Thunder Laufenberg

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

8.1 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Bittner –
Mukwonago AH

INVOICE

42280

DATE

10/21/22

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)

info@SonoPath.com