



PATIENT

Bugsy Sheythe

SPECIES

Feline

BREED

DSH

SEX

NM

AGE

4.5 yrs

WEIGHT

11 lbs.

PRESENTING CLINICAL SIGNS

8/30/2022 - patient doesn't want to eat as much, dental disease, hx of urinary issues (has been on Hill's c/d multi 9/20/2022 - Preop labwork showed elevated, but normal renal values and possible stress leukogram. 9/22/2022 - dental procedure performed 10/7/2022 - repeat labwork, renal values still high/normal and mild increase since labwork 3-4 weeks prior. Screening abdominal ultrasound to visualize kidneys

Abnormal PE/Chem/CBC/UA Results: 10/1/2018 - BUN - 28 Creat - 1.0 Few mixed crystals (struvite/calcium) 8/31/2022 Protein 1+ Struvite (Triple P04) Crystals 0-1HPF 9/20/2022 BUN 23MG/DL Creatinine 2.3MG/DL WBC 2.6x1000/UL Neutrophils 1430 /UL Lymphocytes 676 /UL 10/7/2022 BUN 24MG/DL Creatinine 2.5MG/DL WBC 3.8x1000/UL Neutrophils 2470 /UL Lymphocytes 912 /UL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone containing anechoic urine with minor nondependent particulate to pinpoint hyperechoic sediment, which may indicate cellular debris / protein or crystalline debris. No evidence of inflammatory or neoplastic mural changes. The urethra exhibited normal structure and tone to a depth of 2.0 cm.

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

Normal size was present in the kidneys with subtle evidence of mild asymmetrical right renal margination. A normal 1:3 cortex / medulla ratio was maintained with subjective mild uniform increased cortex echogenicity. Adequate to mildly enhanced corticomedullary border demarcation was noted. No pyelectasia was present. Potential for emerging pinpoint medullary mineral was noted. The left kidney measured 3.5 cm in length. The right kidney measured 3.6 cm in length.

IMAGING PERFORMED BY

Dr. Robyn Lantz

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.31 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.28 cm width.

HOSPITAL NAME

Eastgate VC

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. The spleen measured 0.78 cm width at the level of the hilus.

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Liver/ Gallbladder

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.

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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. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.

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

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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

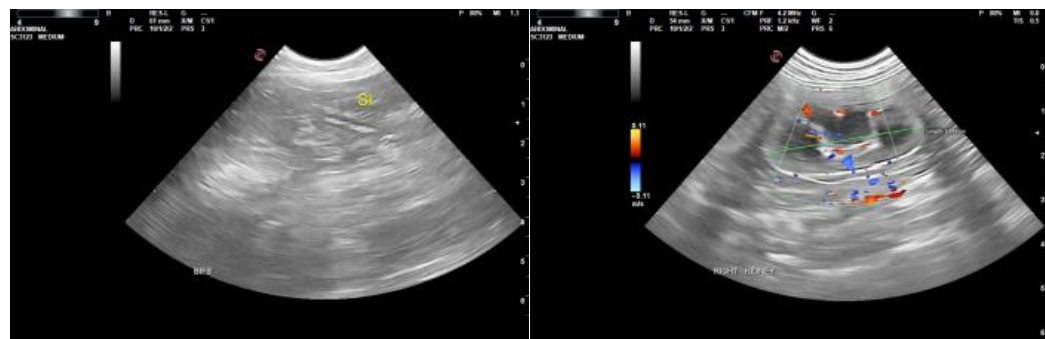
ULTRASONOGRAPHIC FINDINGS

- Normal renal size and margination exhibiting nonspecific mild increased cortex echogenicity and potential emerging pinpoint medullary mineralization
- Sonographically normal urinary bladder with mild urinary bladder sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall renal presentation was nonspecific without overt evidence of significant renal pathology, i.e., significant nephritis pattern, neoplastic criteria, pyelectasia, dysplasia, or other definitive renal pathology. Potential for emerging renal insufficiency or nephropathy, given the mildly progressive azotemia, could certainly be possible, however.

Further assessment may include screening urine C/S, as well as baseline UPC level. Continued urinary or renal diet and monitoring of renal response pending further renal staging would be appropriate. Recheck sonogram is suggested if continued evidence of progressive azotemia. CBC pathology review could be considered.





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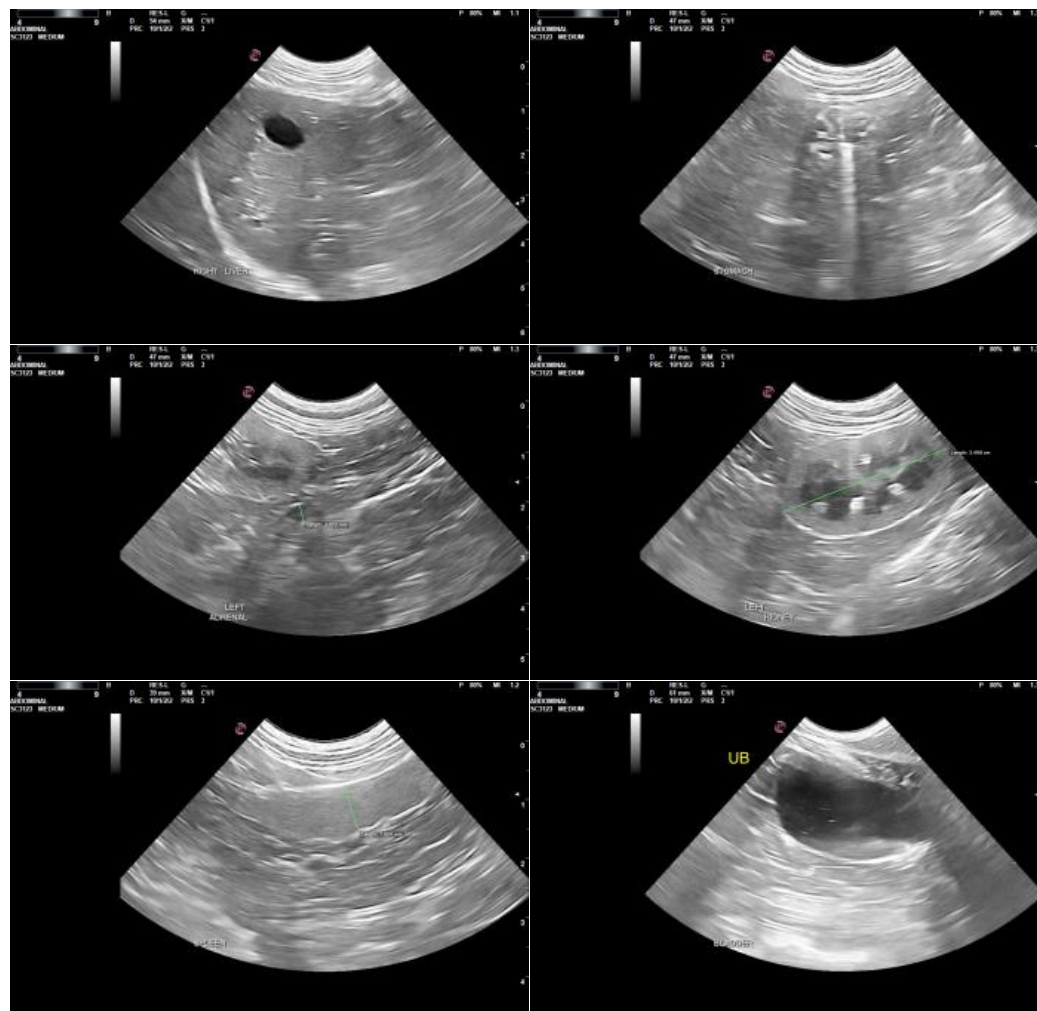
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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