

PATIENT

Massimo Lombardi

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

8 Years 7 Months

WEIGHT

20.75 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Melinda Persson

HOSPITAL NAME

At Home Veterinary

REFERRING VET

Dr. Melinda Persson

INVOICE

12345

DATE

11/19/25

PRESENTING CLINICAL SIGNS

Submitted study contained 30 images of the urinary system only.

Owner had reported PU/PD *Urinalysis by natural voiding -->USG 1.059 -->11-20 RBCs per hpf --> 1+ protein *Wanting to rule out stones/tumor/other

LIMITED ULTRASONOGRAPHIC EXAMINATION

Urinary System

The urinary bladder exhibited normal size and tone. Normal wall without evidence of cystitis or tumors. Primarily anechoic urine was present in the lumen. Nondependent particulate mild sediment was present without evidence of mineral or calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted. The trigone and cystourethral junction were free of pathology. The urethra was normal in structure and tone to a depth of 3.0 cm.

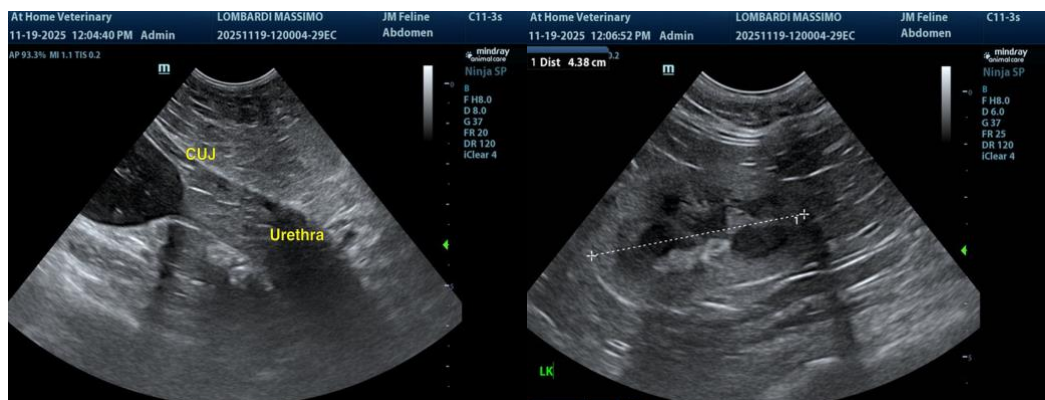
Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pyelectasia. The left kidney measured 4.4 cm in length. The right kidney measured 4.5 cm in length.

ULTRASONOGRAPHIC FINDINGS

- Normal urinary bladder and visible proximal urethra with mild urine sediment.
- Normal bilateral kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine culture/sensitivity on sterile urine sample if evidence of inflammatory sediment or UPC if non-inflammatory sediment and persistent proteinuria may be considered.





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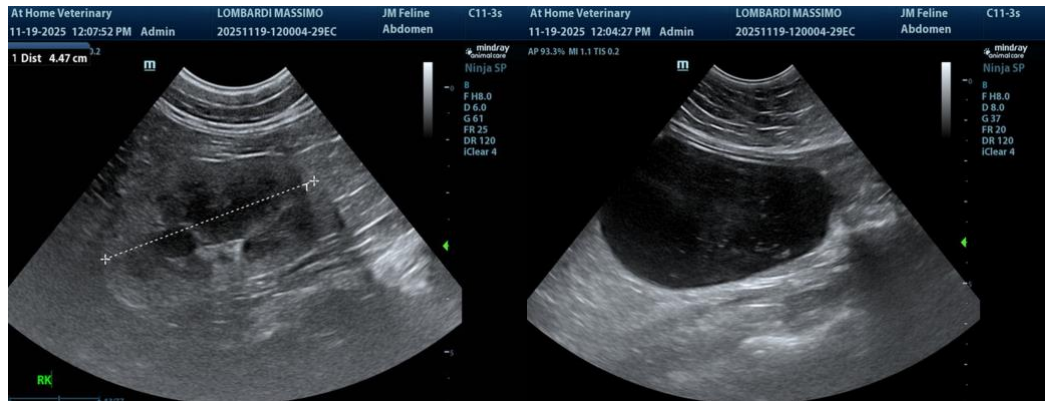
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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