



PATIENT

Otis McCartney

SPECIES

Canine

BREED

Nova Scotia Duck
Trolled Retriever

SEX

M/N

AGE

17 months

WEIGHT

15 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Belan

HOSPITAL NAME

Signal Hill AH

REFERRING VET

Dr. Lebouldus

INVOICE

16105

DATE

2/9/23

PRESENTING CLINICAL SIGNS

History of on going azotemia suspect congenital renal disease. Has injected marijuana. Kidneys looked enlarged on Ab x rays

Abnormal PE/Chem/CBC/UA Results: Ongoing azotemia UA sg 1010, mild elevation BUN and Creatine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. 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 inflammatory criteria or neoplastic changes was noted. No evidence of mineral or calculi was noted.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

Both kidneys exhibited asymmetrical margination, irregular cortical hypertrophy, reduced medullary volume, and pinpoint dystrophic corticomedullary mineralization. Potential for cortico-microinfarction or fibrosis along with small cortical cysts is possible. The left kidney appeared to be subnormal in size compared to the right. The left kidney measured 3.4 cm in length. The right kidney measured 4.5 cm in length. No evidence of left or right retroperitoneal inflammation was noted.

Adrenal Glands

The left adrenal gland was subjectively mildly subnormal in size with normal contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.26 cm width at the caudal pole and 0.35 cm width at the cranial pole. The right adrenal gland was normal in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm width at the caudal pole and 0.49 cm width at the cranial pole.

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/ 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

Focal to intermittent mesenteric lymph nodes were present, not consistent with inflammatory or neoplastic criteria. The lymph nodes are considered incidental. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width:length ratio (<0.5).

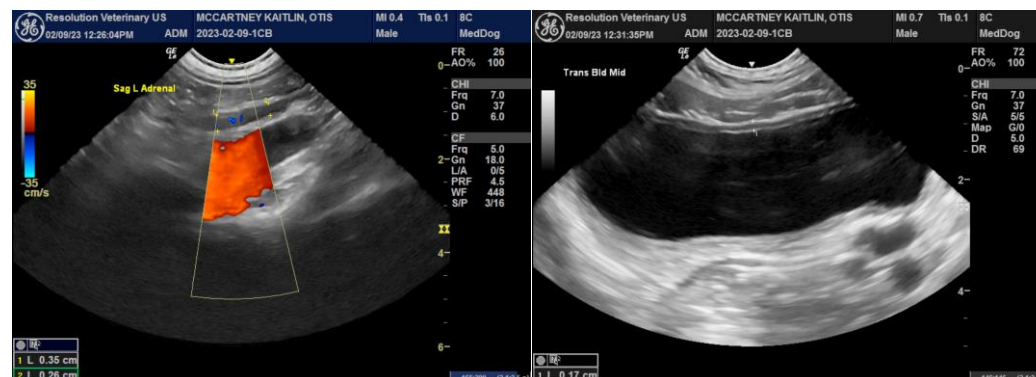
ULTRASONOGRAPHIC FINDINGS

- Bilateral congenital renal dysplasia pattern with cortical cysts
- Subjective mild subnormal left adrenal gland - nonspecific

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sonographic appearance of the kidneys, given the patient's age, is consistent with congenital renal dysplasia. Potential for nonspecific chronic nephritis i.e., interstitial nephritis, glomerulonephritis, or other nonspecific chronic nephropathy possible.

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Renal biopsy would be required for a definitive diagnosis, yet may further adversely affect renal function. Pending further renal workup, CRD therapy is recommended. Screening resting cortisol level may be considered. Given renal presentation, yet likely dependent upon the degree of progressive azotemia, a guarded to extremely guarded long-term prognosis is indicated.





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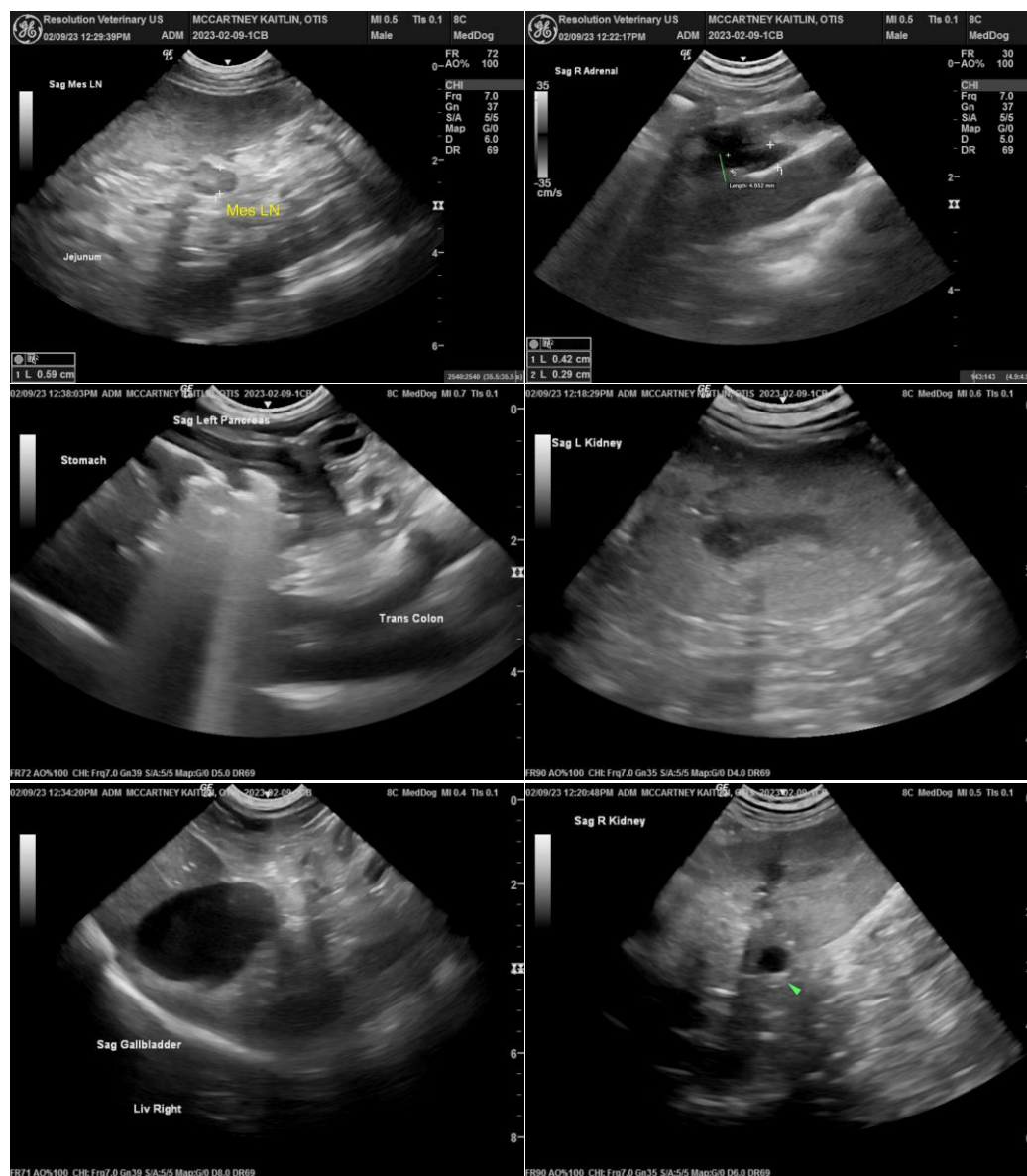
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com