



## PATIENT

Grayson Davis

## PRESENTING CLINICAL SIGNS

mildly elevated kidney with markedly enlarged kidney on x-ray  
Abnormal PE/Chem/CBC/UA Results: Creatinine at high end of normal, BUN 40, mild anemia

## SPECIES

Feline

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder was distended in size with normal tone. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild to moderate, particulate non-dependent urine sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

## BREED

DSH

## SEX

MN

The left kidney was deformed and asymmetrical, exhibiting irregular diffusely hyperechoic parenchyma. Areas of mild medullary mineral were present. The left kidney was contained in a moderately sized anechoic cyst like cavity, containing anechoic fluid measuring ~ 7 to 8 cm in diameter, consistent with perinephric pseudocyst.

## AGE

20yr

Normal renal size with asymmetrical margination was present in the right kidney. 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 corticomodullary distinction was also present. The renal medullary volume was subjectively reduced. Bilateral areas of focal to mild medullary mineral were present. Scant right kidney perinephric effusion.

## WEIGHT

9lb

The left kidney measured 3.7 cm in length. The right kidney measured 4.2 cm in length.

## INTERPRETED BY

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

The area of the aortic trifurcation was free of pathology.

### Adrenal Glands

No obvious pathology area of the left or right adrenal glands.

### 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.

## IMAGING PERFORMED BY

Michael Schacher

## HOSPITAL NAME

Emergency  
Veterinarians of Idaho

### Liver/Gallbladder

The liver was subjectively possibly borderline enlarged in size. 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 gravity dependent to mildly non-dependent non-organized debris. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

## REFERRING VET

Lee Koch

## INVOICE

24079

### Gastrointestinal

## DATE

03/02/2026



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild non-shadowing ingesta sonographically suggestive of food echogenicity with no signs of obstruction or foreign material.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental non-shadowing ingesta and lumen gas to the level of the colon.

The small intestinal wall measured 0.23 cm in width.

## BREED

DSH

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

### *Pancreas*

The pancreas was mildly prominent in size with capsule asymmetry and non-homogenous mildly hypoechoic parenchyma.

## SEX

### *Free Abdomen*

MN

No peritoneal effusion was present.

## AGE

20yr

Mild peri-ileocolic hyperechoic omentum.

Multiple small mildly prominent to enlarged colic lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

## WEIGHT

9lb

## ULTRASONOGRAPHIC FINDINGS

### Primary

- Left kidney chronic degenerative changes with perinephric pseudocyst
- Moderate right kidney chronic changes exhibiting mild medullary mineral and scant perinephric effusion
- Borderline enlarged non-homogenous liver
- Gallbladder debris
- Chronic active pancreatitis with remodeling
- Normal gastrointestinal tract with gastrointestinal ingesta
- Mild distended urinary bladder with moderate urine sediment

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Ultrasound guided percutaneous drainage of the left kidney pseudocyst could be considered with fluid analysis, however perinephric pseudocysts tend to recur. CKD therapy is indicated. A spec FPL is recommended. Hepatic benign remodeling associated with age, given normal reported hepatic enzymes is probable. Monitoring of hepatic enzymes for evidence of inflammation given concurrent gallbladder debris is recommended. No evidence of neoplastic criteria.



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**AGE**

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**HOSPITAL NAME**

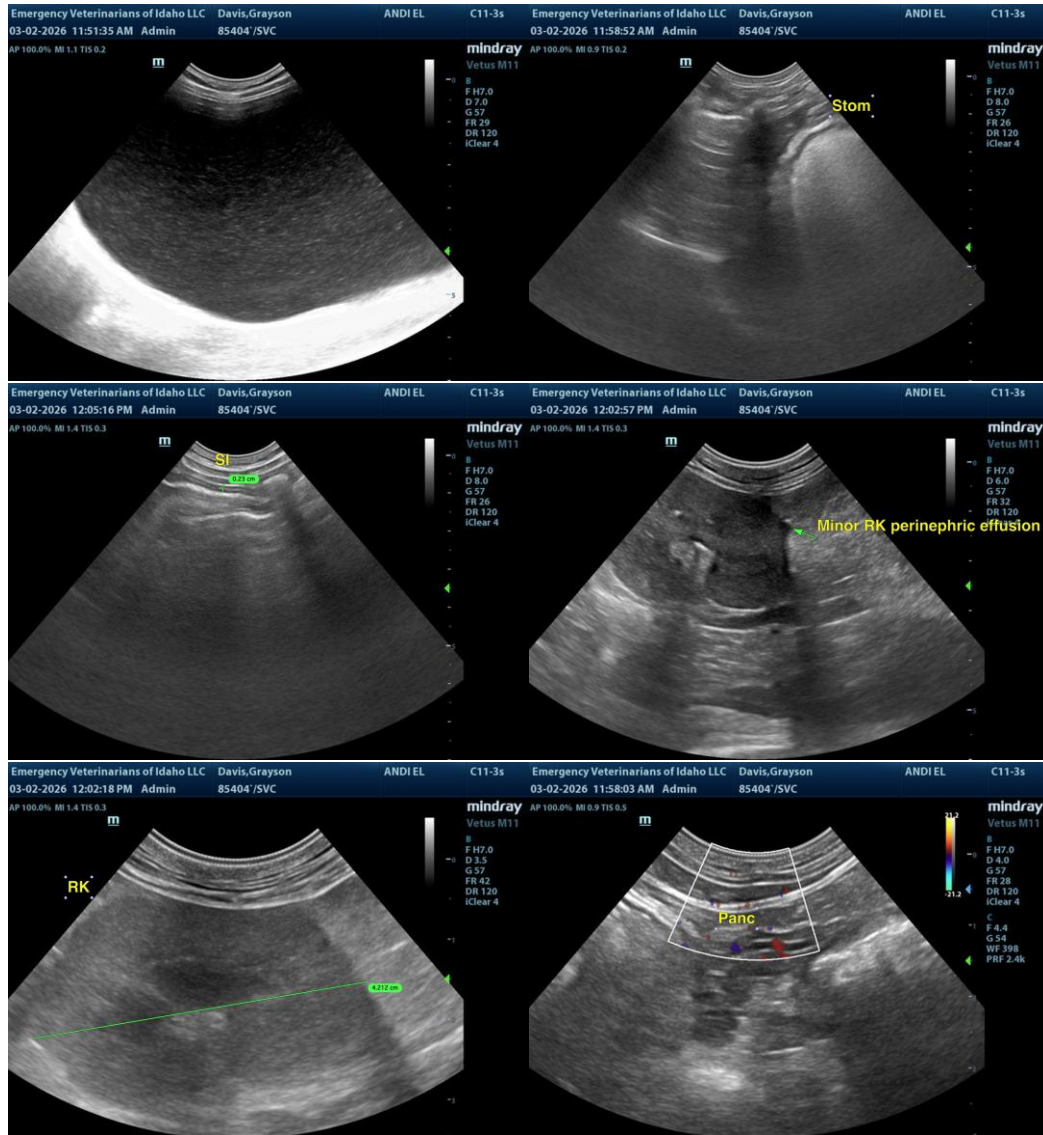
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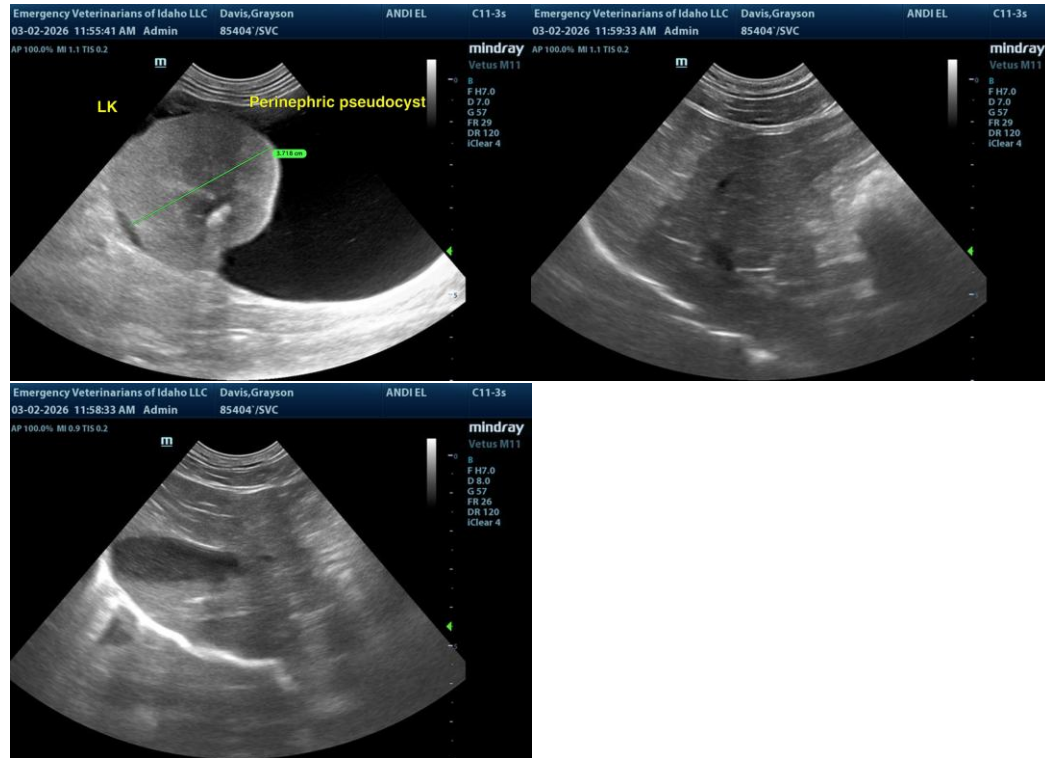
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)