



**PATIENT**

Kitty Wible

**PRESENTING CLINICAL SIGNS**

Presented 4/15 for suspect oral ulcer or irritation. Hx IRIS stage 3-4 CKD, constipation, hyporexia.

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: 4/10/23 - rDVM CBC: wnl, Chem: SDMA 25, Crea 4.6, BUN 91, Phos 6.4, TT4 wnl. 4/15 PM (intake at Wilvet South) - EPOC: BUN 73, Crea 5.68 Exam: Dehydrated, ulcer on rostral lower right lip (r/o injury/ necrotic tissue, uremic ulcer, neoplasia, open). Hospitalized on IVF. 4/16 12pm - Recheck EPOC: Creat 3.59 , BUN 60, K 4.1, Na 153, HCT 31% UA: rods present. Urine culture pending. Started IV abx. 4/17 - 12am: BUN 52, Crea 3.31, HCT 33%. Phos = 5.2 (wnl).

**BREED**

DSH

**LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE URINARY SYSTEM**

**Urinary System**

**SEX**

FS

The urinary bladder was subnormal in size owing to lack of urinary distention with overtly normal walls. No evidence of cystitis criteria. No urinary bladder tumors. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Mild anechoic urine was present in the lumen with potential for suspected mild particulate sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus.

**AGE**

12yr

The left kidney was subnormal in size. A normal 1:3 cortex / medulla ratio and marked loss of corticomedullary definition were present. Pinpoint to focal areas of medullary to pelvic mineralization were present. No pyelectasia was present. The left kidney measured 1.6 cm in length.

**WEIGHT**

4.08kg

The right kidney was mildly enlarged in size with symmetrical capsule contour. Mild cortical hypertrophy with moderate loss of corticomedullary border demarcation was present. No pyelectasia was present. The right kidney measured 4.6 cm in length.

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC FINDINGS**

- Subnormal urinary bladder with mild particulate sediment.
- Marked subnormal left kidney size exhibited marked chronic degenerative changes and pinpoint medullary mineral.
- Right kidney moderate chronic changes with compensatory hypertrophy.

**IMAGING PERFORMED BY**

Bennett

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Wilvet South

The functionality of the subnormal left kidney is questionable. The right kidney did not overtly appear to be end stage. Correlation with pending C/S is recommended. Baseline UPC level is suggested if there is no evidence of significant inflammatory sediment or UTI. Continued empirical therapy for chronic kidney disease would be reasonable. Prognosis is likely dependent upon continued renal response to as needed IVF, CKD therapy and treatment for UTI, however a guarded prognosis is indicated.

**REFERRING VET**

Bennett

**INVOICE**

13491ag

**DATE**

04/17/2023



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**SPECIES**

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DSH

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**AGE**

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**WEIGHT**

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**HOSPITAL NAME**

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**REFERRING VET**

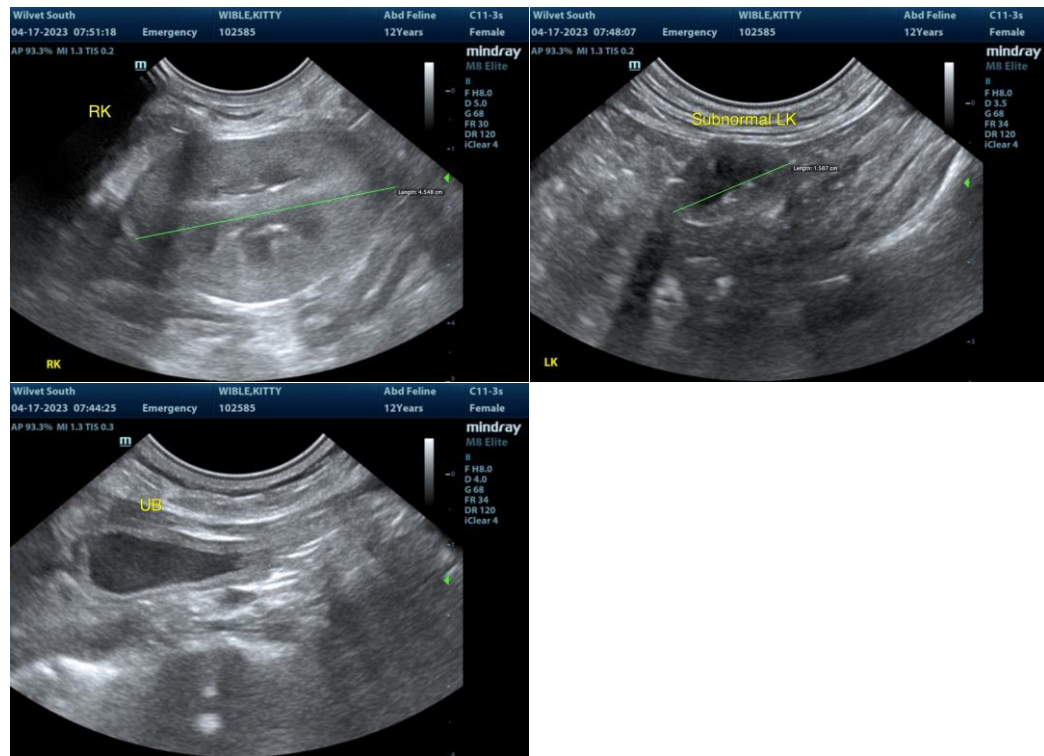
Bennett

**INVOICE**

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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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