

**PATIENT**

Lionel Jones

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

9y 5m

**WEIGHT**

14.7 lbs.

**PRESENTING CLINICAL SIGNS**

Hx of "urinary obstruction" symptoms, stranguria, hematuria, crystalluria. Current meds: Buprenex  
Abnormal PE/Chem/CBC/UA Results: Bw-nsf, Urine cysto pending

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder was normal in size and tone. The urinary bladder walls were normal in appearance without evidence of inflammatory or neoplastic criteria. Anechoic urine with moderate, non-dependent, particulate sediment, along with focal dependent minor mineral, was noted. The urethra exhibited normal structure and tone to a depth of 2.0 cm.

The area of the aortic trifurcation was free of pathology.

Normal renal size with asymmetrical margination were present in both kidneys with likely small cortical infarcts. 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 corticomedullary distinction was also present. Pinpoint medullary mineral was noted in both kidneys. The renal medullary volume was subjectively reduced. The left kidney measured 4.4 cm in length. The right kidney measured 4.4 cm in length.

**INTERPRETED BY**

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

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.44 cm width. No overt pathology was noted in the area of the right adrenal gland.

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**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.

**HOSPITAL NAME**

Andover AH

**Liver/ Gallbladder**

**REFERRING VET**

Dr. Bihlear

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 subnormal in size containing anechoic content. The gallbladder appeared to be potentially divided into two compartments, consistent with bilobed gallbladder. The cystic and common bile ducts were normal.

**INVOICE**

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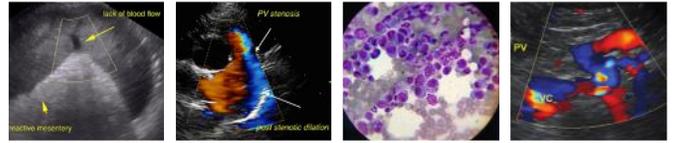
**Gastrointestinal**

**DATE**

8/25/22

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate ingesta exhibiting mild progressive distal acoustic shadowing.

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.



**PATIENT**

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

Lionel Jones

**Pancreas**

**SPECIES**

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.

Feline

**BREED**

**Free Abdomen**

DSH

No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

**ULTRASONOGRAPHIC FINDINGS**

MN

**Primary Findings**

**AGE**

- Moderate nondependent urinary bladder sediment with focal dependent mineral
- Bilateral chronic interstitial nephrosis renal pattern with pinpoint medullary mineral and cortical infarcts
- Gastric ingesta - likely post prandial presentation

9y 5m

**WEIGHT**

**Secondary Findings**

14.7 lbs.

- Subjective bilobed gallbladder - normal variant in a cat

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

The bilateral kidneys are consistent with chronic renal changes and suggestive of possible interstitial nephrosis / nephritis. This does not appear to be clinically significant at this point, given lack of azotemia. Monitoring of renal parameters going forward is advised. Urine culture and sensitivity on a sterile urine sample to assess for or rule out underlying infection is recommended. Pending urine C/S, empirical therapy for idiopathic cystitis, which may include urinary diet and additional therapy with assessment of clinical response would be reasonable.

**IMAGING PERFORMED BY**

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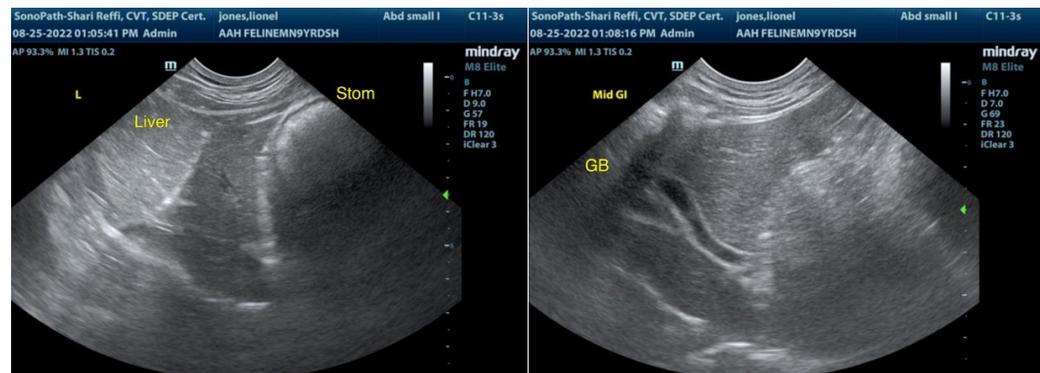
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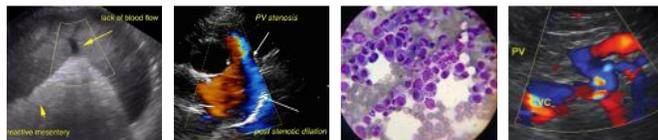
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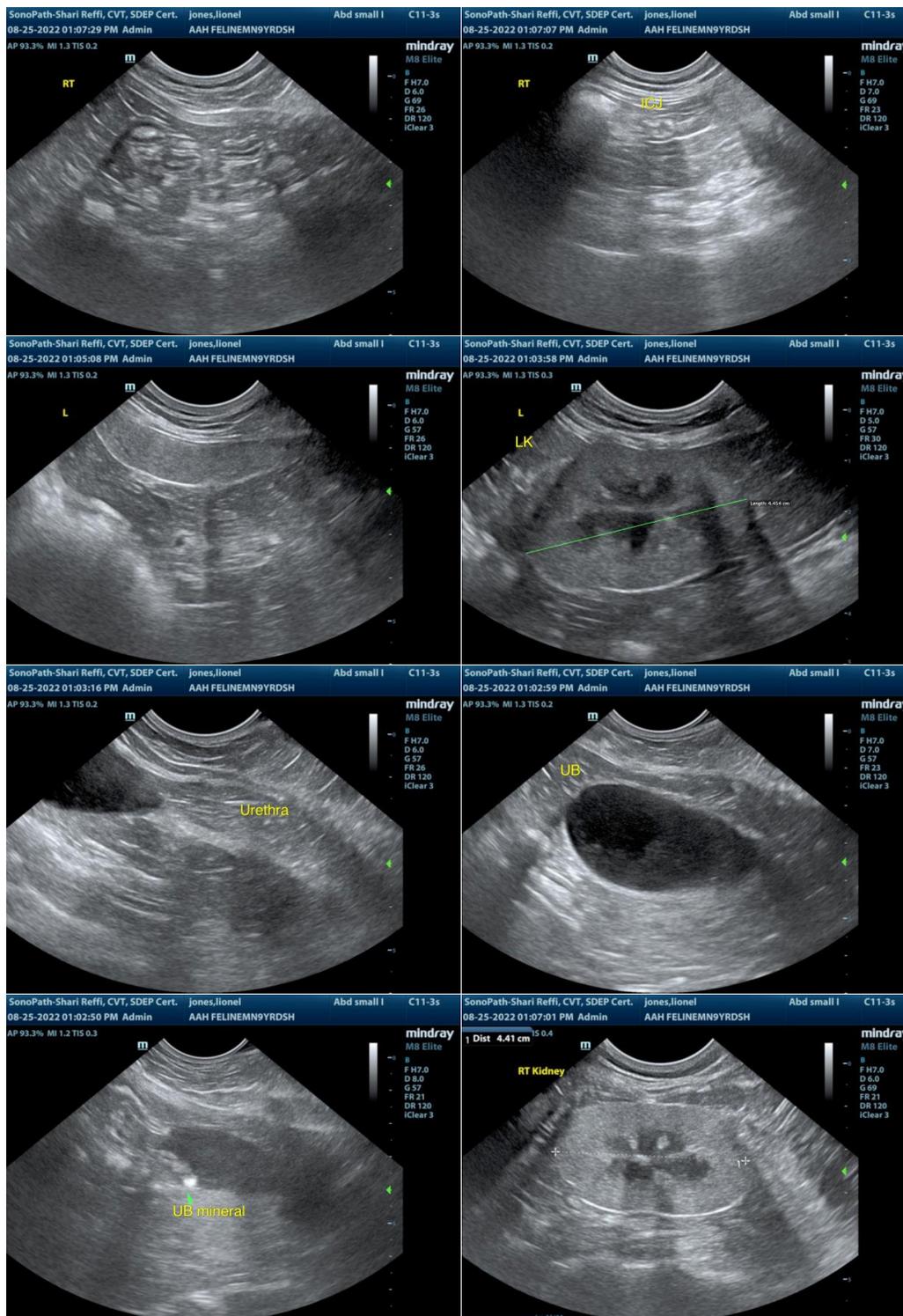
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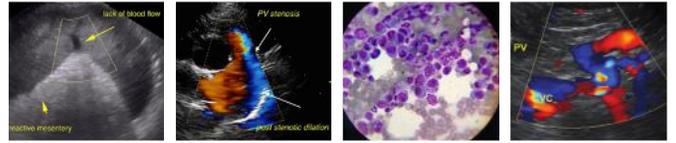
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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Lionel Jones

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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Feline

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info@SonoPath.com

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