


PATIENT PRESENTING CLINICAL SIGNS

Magic Bloch History: weight loss, not eating as much, chronic hematuria

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Azotemia Creat =242, sdma=18 CBC WNL, T4 WNL UA sg= 1.027 but significant Hematuria+++ persistent for year

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED

DSH

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild nondependent hyperechoic sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX

MN

The left kidney was low normal in size measuring 3.1 cm in length with asymmetrical margination. Marked loss of corticomedullary definition with areas of hyperechoic cortical echogenicity and loss of medullary volume were noted.

AGE

10yr

The right kidney was subnormal in size measuring 2.3 cm in length. Marked loss of corticomedullary definition with areas of hyperechoic cortical echogenicity and loss of medullary volume were noted.

The area of the aortic trifurcation was free of pathology.

WEIGHT

8.9kg

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.46 cm width.

INTERPRETED BY

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

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

Kelly Reschny

Liver

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.

HOSPITAL NAME

Tansley Woods Animal
 Hospital

REFERRING VET

Dr. Petrowski

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 gastric body wall measured 0.24 cm in width.

INVOICE

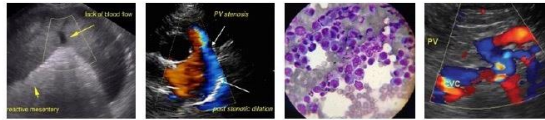
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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The jejunum wall measured 0.22 cm in width.

DATE

08/08/2022

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



PATIENT *Pancreas*

Magic Bloch 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 was evident.

SPECIES *Free Abdomen*

Feline No omental masses, overt lymphadenopathy or peritoneal effusion was present.

BREED **ULTRASONOGRAPHIC FINDINGS**

- DSH • Sonographically unremarkable urinary bladder with mild nondependent sediment
- Bilateral marked chronic degenerative kidney changes with cortical infarcts and suspect fibrosis
- Sonographically unremarkable GI tract

SEX **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

MN No overt evidence of lower urinary tract pathology was observed in this study as an obvious cause of chronic hematuria. This may indicate hematuria originating from the kidneys given the renal changes. Potential for nonspecific nephritis vs chronic to progressive renal disease possible. No overt evidence of renal neoplastic criteria.

AGE Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. CRD therapy would be reasonable.

WEIGHT 8.9kg A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or rule out occult disease which may be a contributing factor to the patient's weight loss.

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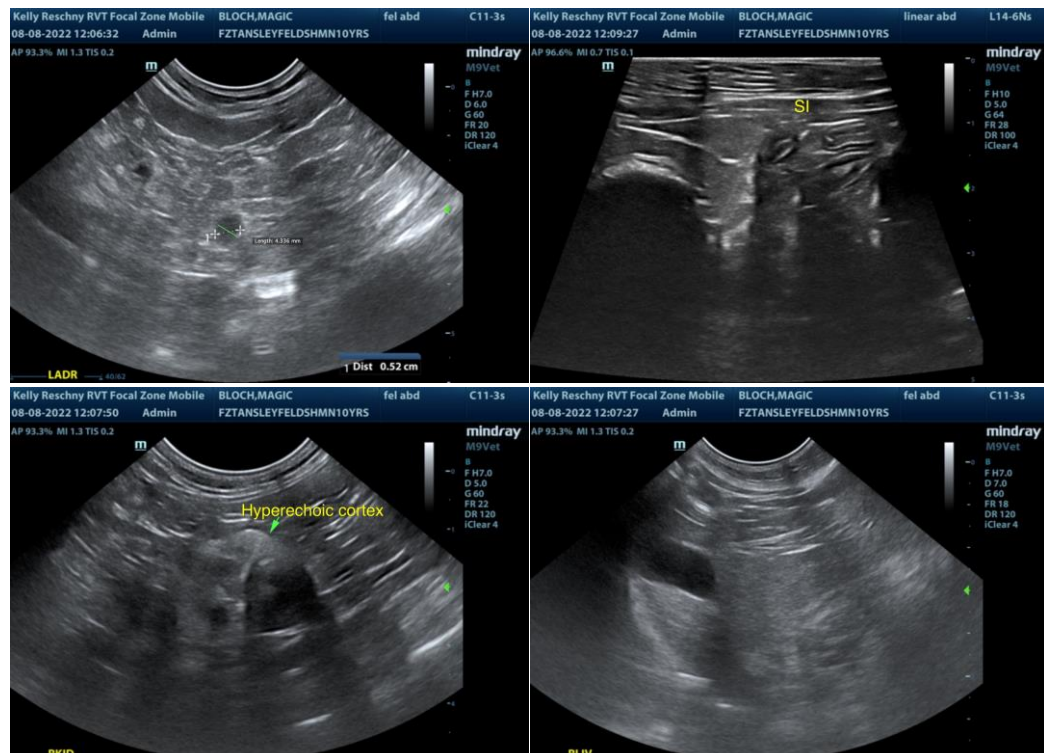
Dr. Petrowski

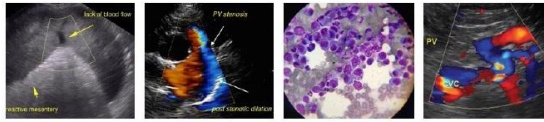
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PATIENT

Magic Bloch

SPECIES

Feline

BREED

DSH

SEX

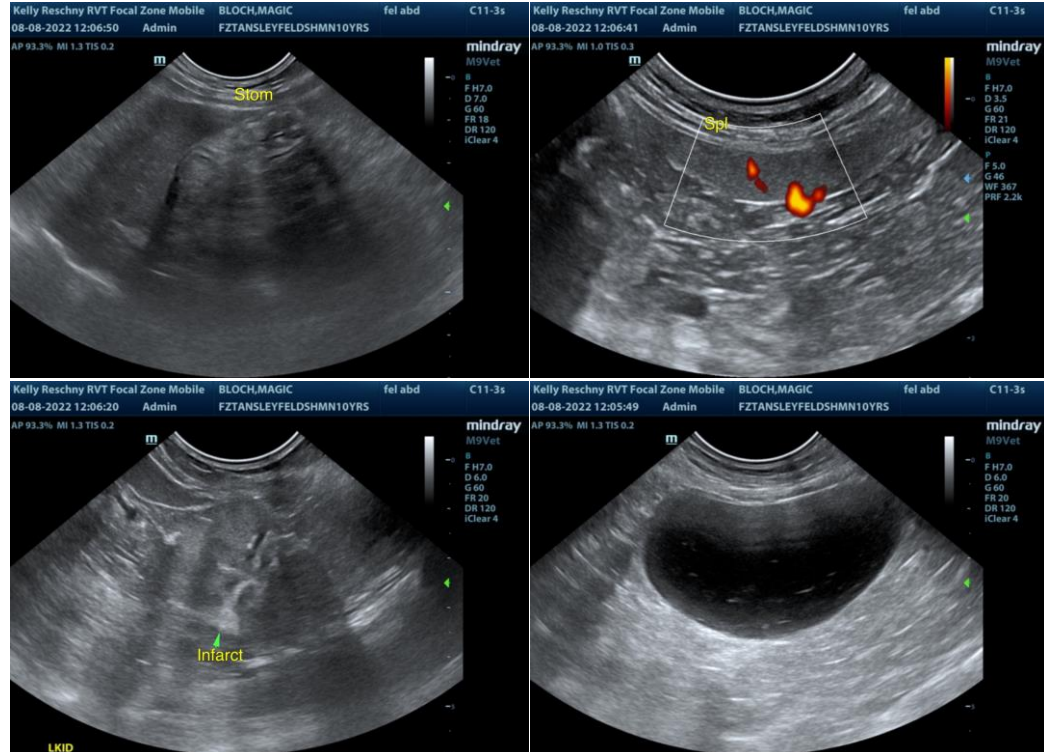
MN

AGE

10yr

WEIGHT

8.9kg



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.

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