

PATIENT PRESENTING CLINICAL SIGNS

Ranger Ausmus last night o came back from work and p was shaking and hiding. trouble jumping on/bed, not interested in food last night or this morning. o says L side of abdomen seemed painful when palpated. p was also sitting more to one side and couldn't seem to get comfortable. o is worried about potential trauma, o is a travel nurse so p is in a hotel room alone, o concerned for trauma, poss. from jumping off bed. AFAST: The left renal pelvis is distended and fluid filled with anechoic fluid, compressing the cortex and medulla with generalized enlargement of the left kidney. The right kidney appears normal, but subjectively enlarged. The urinary bladder is small with thickened walls.

SPECIES

Canine

BREED

Labrador Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

MN

The urinary bladder was normal in size and tone with normal appearing bladder walls. 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 no uroliths or sediment. The ureteral papillae were normal.

AGE

6yr

The left kidney was mildly enlarged in size compared to the right. Moderate to severe hydronephrosis exhibited by replacement of medullary parenchyma with anechoic urine. Maintained cortical parenchyma was present. Concurrent mildly dilated to tortuous proximal left ureter containing anechoic urine extending for several cm distal to the left kidney was present. The entire ureter to the level of the urinary bladder was not definitively visualized. The right kidney was normal in size and margination. No evidence of right kidney hydronephrosis, hydroureter or pyelectasia. The left kidney measured 5.7 cm in length. The right kidney measured 5.3 cm in length.

WEIGHT

25lb

INTERPRETED BY

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

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology measuring 1.0 cm in diameter.

IMAGING PERFORMED BY

Jenna Walsh CVT

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.74 cm width at the caudal pole and 2.0 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.52 cm width at the caudal pole and 2.3 cm length.

HOSPITAL NAME

Wilvet Salem

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.

REFERRING VET

Dr. Menzen

INVOICE

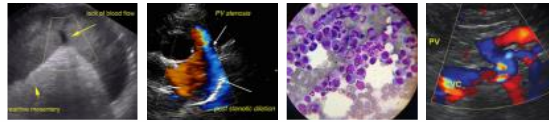
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Liver/Gallbladder

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.

DATE

08/08/2023



PATIENT *Gastrointestinal*

Ranger Ausmus The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild echogenic ingesta sonographically consistent with food with no signs of ileus, obstruction or foreign material.

SPECIES

Canine 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.

BREED

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

SEX

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.

MN

AGE

Free Abdomen

6yr No omental masses, overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

ULTRASONOGRAPHIC FINDINGS

- Moderate to severe left kidney hydronephrosis with proximal left hydroureter.
- Sonographically normal right kidney.
- Normal urinary bladder-no evidence of obstructive mural or ureteral pathology.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Aside from the left kidney hydronephrosis and proximal left hydroureter, there is no overt evidence of significant abdominal visceral pathology as a contributing factor to the patient's clinical signs. Although a definitive area of left ureter obstruction was not visualized, concern for obstructive left ureter pathology i.e., non-visualized calculus, stricture etc. is strongly suspected.

IMAGING PERFORMED BY

Jenna Walsh CVT

If not recently done UA with C/S is recommended. Advanced imaging which may include contrast urography or ideally gold standard CT with contrast is likely required for further clarification and diagnosis.

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Sonographically, functionality of the left kidney is highly questionable. Potential left nephrectomy may be indicated.

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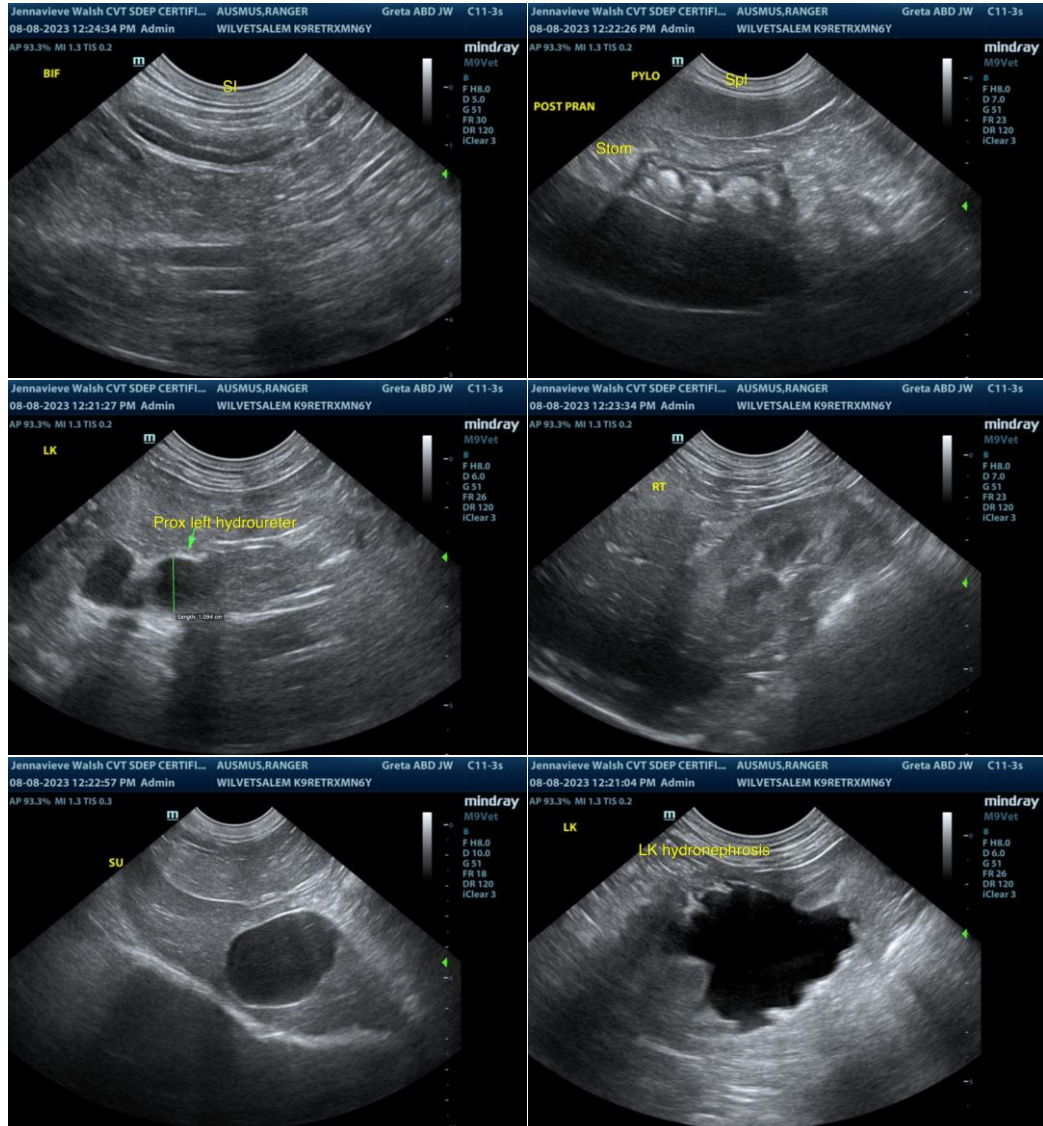
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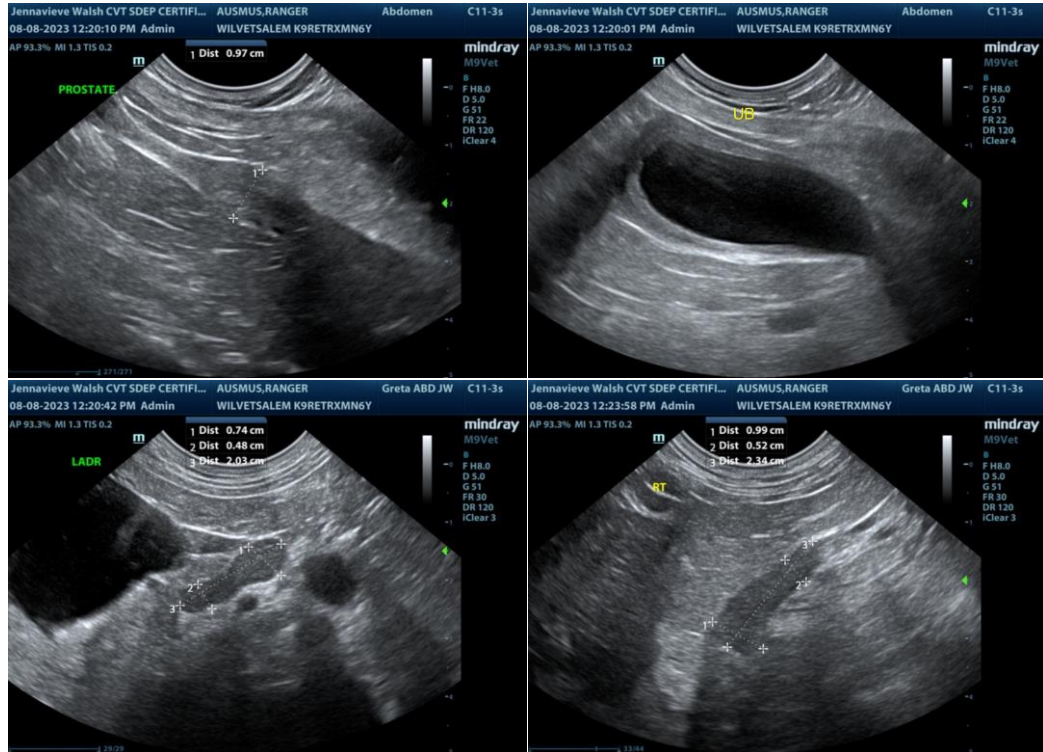
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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