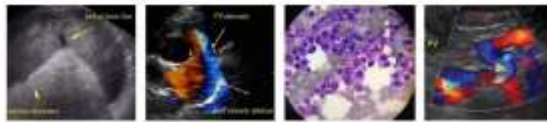




PATIENT	PRESENTING CLINICAL SIGNS
Leo Vanderventer	chronic worsening hematuria, PUPD Abnormal PE/Chem/CBC/UA Results: SDMA 19, Urea 16, creat 159 UA usg 1.031, RBC 50-75/hpf, ph 6.5, wbc 0-2/hpf
SPECIES	
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
	Urinary System
DSH	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild to moderate, dependent to non-dependent, particulate, echogenic to pinpoint hyperechoic sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. The urinary bladder walls were sonographically unremarkable without evidence of inflammatory or neoplastic criteria. No evidence of macro calculi was noted.
SEX	
Neutered Male	
AGE	
13 years	The area of the aortic trifurcation was free of pathology. Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. Suspected emerging to pinpoint medullary mineral was present in both kidneys. No evidence of pyelectasia was present. The left kidney measured 4.0 cm in length. The right kidney measured 3.55 cm in length.
WEIGHT	
7.1 kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.30 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.40 cm width.
IMAGING PERFORMED BY	Spleen
Kelly Reshny, RVT	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	Liver/ Gallbladder
AH of Stoney Creek	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.
REFERRING VET	Gastrointestinal
Dr. Ozimok	The stomach presented intact wall layering with a normal wall layer ratio. Mild to moderate, echogenic, progressively shadowing ingesta was present. The gastric body wall width measured 0.25 cm.
INVOICE	
12277	
DATE	
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PATIENT	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 width measured 0.22 cm.
Leo Vanderventer	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Feline	Pancreas
BREED	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
DSH	Free Abdomen
SEX	No overt lymphadenopathy or peritoneal effusion was present.
Neutered Male	ULTRASONOGRAPHIC FINDINGS
AGE	Primary Findings
13 years	<ul style="list-style-type: none">Mild to moderate urinary bladder sediment to pinpoint mineralBilateral mild chronic renal changes- no overt pyelectasia / pyelonephritis
WEIGHT	Secondary Findings
7.1 kg	<ul style="list-style-type: none">Gastric IngestaMild heterogeneous pancreas - age-related pancreatic changes suspected, likely incidental
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP	The presence of gastric ingesta is nonspecific and likely indicates post-prandial presentation. Correlation with most recent meal ingestion is recommended. If documented NPO prior to the ultrasound, the presence of gastric ingesta may indicate some degree of gastric hypomotility or metabolic stasis. The sonographic presentation of the ingesta was most consistent with food, without evidence of foreign material. Potential for a mild amount of nonobstructive hair in the stomach is possible. Hairball therapy may be considered if clinically indicated.
IMAGING PERFORMED BY	
Kelly Reshny, RVT	
HOSPITAL NAME	
AH of Stoney Creek	Given the azotemia, the PU/PD in this patient may be owing to mild chronic renal insufficiency. An obvious cause of the hematuria was not definitively evident. Urine C/S on a sterile urine sample +/- baseline UPC if no evidence of inflammatory cells is recommended. Given the presence of urinary bladder sediment and pinpoint mineral, yet lack of urinary bladder mural pathology, the potential for primary renal hematuria i.e., idiopathic renal hematuria or other may be possible. Empirically, therapy for chronic renal disease and/or Idiopathic cystitis would be appropriate.
REFERRING VET	
Dr. Ozimok	
INVOICE	
12277	
DATE	
9/22/21	



PATIENT

Leo Vanderventer

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 years

WEIGHT

7.1 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

AH of Stoney Creek

REFERRING VET

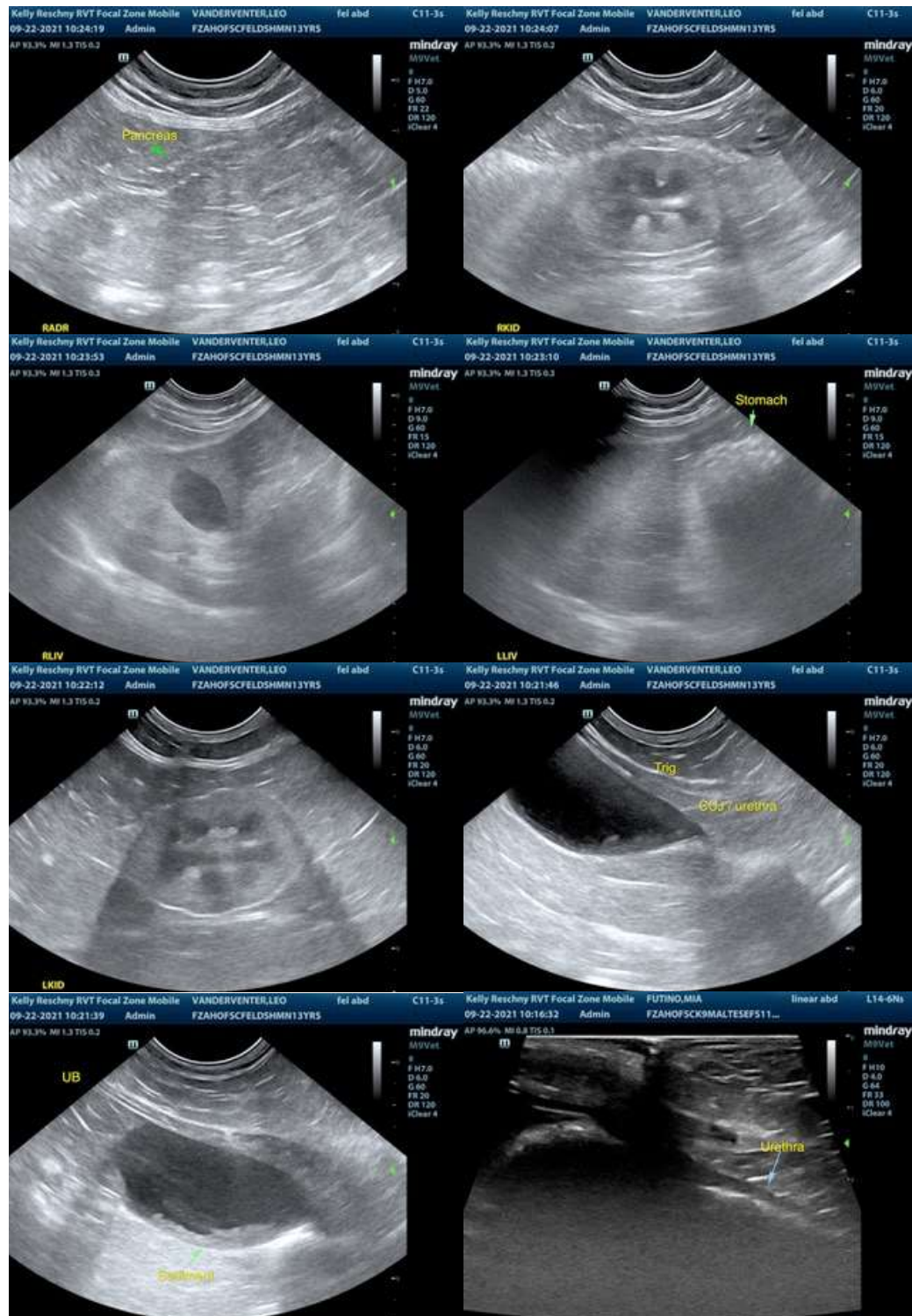
Dr. Ozimok

INVOICE

12277

DATE

9/22/21





PATIENT

Leo Vanderventer

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

SPECIES

Feline

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.

BREED

DSH

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

Neutered Male

AGE

13 years

WEIGHT

7.1 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

AH of Stoney Creek

REFERRING VET

Dr. Ozimok

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