



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Macy Gadol Reason for Visit: blood in urine History: 15yr old SF Shorthair is presented today because O noticed Blood in P's urine this morning & thinks something is wrong with P's bladder or possibly a UTI O states that back in 2001 P had a bladder infection that was cleared up with clavamox. O is worried P may have been experiencing a UTI for about a month due to P's increase in thirst lately. P is still experiencing lameness in front legs/ shaking in front right leg.

**SPECIES** Feline Abnormal PE/Chem/CBC/UA Results: Physical Examination Key -- (N= Normal, A= Abnormal) CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear OU and AU. No nasal discharge. No cough on tracheal palpation. Oral cavity: Moderate dental tartar, gingivitis Musculoskeletal: BCS = 5/9. Moderate muscle atrophy on hindlimbs. Unable to evaluate ambulation - pet was sedated

**BREED** DSH Uro/Perineum: No significant lesions Abd/GI: Soft, non-painful. No masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. No significant abnormalities Skin: Tiny, pink, hairless dermal growth at dorsal aspect of R metacarpus. Good hair coat. No ectoparasites seen Mentation: BAR Hydration: N Fecal: Not performed today Diagnostic Testing Needed: Senior wellness in-house, Radiographs (RF limb), Urine C&S Declined Diagnostics/Treatments: None Findings: 1) CBC: HCT 28.5 (30.3-52.3), HGB 9.0 (9.8-16.2), LYM 0.90 (0.92-6.88) 2) CHEM: SDMA 35 (0-14), K 3.3 (3.5-5.8) 3) TT4: 4.2 (0.8-4.7) 4) FeLV/FIV/HW snap test: Negative 5) UA (cysto): SG 1.015, PRO 30mg/dL, BLD 250Bld/uL, LEU 500Leu/uL, WBC >50/hpf, RBC >50/hpf, rods present, cocci suspect presence 6) Radiographs: consult pending 7) Urine C&S: Results pending

**SEX** SF

**AGE** 15 Years, 4 Months

**RADIOGRAPHIC STUDY OF THE SHOULDERS & ELBOWS**

Lateral and craniocaudal views of both shoulder and elbows totaling 2 images available for review.

**RADIOGRAPHIC FINDINGS**

The radiographic presentation of both shoulders is within age related normal limits.

There appears to be generalized muscle atrophy and generalized osteopenia throughout all bones of both front limbs.

A wart like dermal nodule is seen dorsal to the right carpus.

The elbow joints present within age related normal limits. No evidence of aggressive bone lesions, traumatic osseous injury, or articular injury is seen.

Course and width of the trachea are within normal limits.

Number, alignment, and anatomy of the cervical vertebrae present within normal limits.

Moderate spondylosis deformans is noted between T11/12.

No significant abnormalities of the cardiovascular and bronchopulmonary structures are seen.

**DATE**

8-7-22

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

Dr. Rivera

**INVOICE**

53314



**PATIENT**

Macy Gadol

**RADIOGRAPHIC DIAGNOSIS**

- Normal age related radiographic presentation of the shoulders and elbows.

**SPECIES**

Feline

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Both elbows and shoulders present within age related normal limits. Mild generalized osteopenia is noted which is likely secondary to disuse. This is further suggested by the presumed generalized muscle loss of the musculature.

**BREED**

DSH

No structural osseous or articular pathology is seen and there appears to be no abnormal soft tissue swelling.

**SEX**

SF

**AGE**

15 Years, 4 Months

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**REFERRING VET**

Dr. Rivera

**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.**

**INVOICE**

53314

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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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