



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Ion Bosworth History: Acute kidney failure, lethargy, anorexia, weight loss.

SPECIES Physical Examination: N/A.

Feline Urinalysis: N/A.

BREED CBC: Hemoconcentration.

DLH Serum Biochemistry: Severe azotemia and hyperphosphatemia, hyperglycemia.

Radiographic Findings: N/A.

SEX

MN

AGE

9 years

WEIGHT

11.6 #

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident. Focal hyperechoic region (0.6 x 0.1 cm) on the ventral apical wall.

Normal trigone area, proximal urethra (0.23 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Left kidney – small (2.9 cm) with a mottled echogenic appearance, loss of cortico-medullary differentiation, irregular capsule, and pyelectasia (0.4 cm). Small cortical cysts.

Right kidney – enlarged (5.7 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, irregular capsule, and pyelectasia (0.7 cm). Small amount of peri-renal fluid accumulation. Small cortical cysts.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 1.16 x 0.36/0.37 cm, right 1.16 x 0.49/0.33 cm.

Spleen

Normal size and echogenic appearance. Body of the spleen is folded on itself. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.28 cm).

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med), PhD,
Dipl. ECVIM

IMAGING PERFORMED BY

Denise Bruno LVT, RDMS

HOSPITAL NAME

Brooklyn Heights
Veterinary Hospital

REFERRING VET

Dr Thomson

INVOICE

302755

DATE

2/16/22



PATIENT *Gastrointestinal*

Ion Bosworth
Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (small intestine 0.24 cm) and peristaltic activity, and no distension of the lumen. Fluid/gas accumulation within the stomach.

SPECIES

Feline

Pancreas

BREED

Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

DLH

Free Abdomen

SEX

No mesenteric lymphadenopathy.

MN

Small amount of acellular ascites.

AGE

ULTRASONOGRAPHIC FINDINGS

9 years

Primary findings:

- Renal disease.

WEIGHT

Secondary findings:

11.6 #

- Ascites.
- Focal bladder wall thickening.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the kidneys is typical for chronic renal disease with bacterial nephritis, granulomatous nephritis, and pyelonephritis, differential diagnoses. The small left kidney is most likely from a previous episode of obstructive uropathy or bacterial nephritis.

The ascites can be ascribed to the renal disease.

Further assessment would be urinalysis, urine culture, and blood pressure.

Initial management would be fluid therapy, antiemetics and gastric protectants (omeprazole, sucralfate) with long term management being renal diet, enteric phosphate binders, and ACE inhibitor/receptor blocker.

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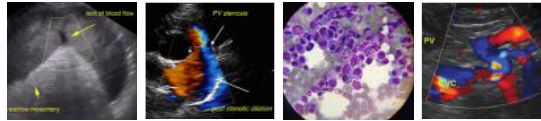
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PATIENT IMAGES

Ion Bosworth

Left kidney

SPECIES

Feline

BREED

DLH

SEX

MN

AGE

9 years

WEIGHT

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Right kidney



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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.

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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