



PATIENT

Maggie English

SPECIES

Canine

BREED

Shih Tzu

SEX

FS

AGE

8 years

WEIGHT

9.6 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Sammy Burmeister

HOSPITAL NAME

Faith Animal Care

REFERRING VET

INVOICE

302759

DATE

2/17/22

PRESENTING CLINICAL SIGNS

History: Cystostomy performed on 8/13/21. Post op no UTI but elevated UPC with progressive elevation since then. On benazepril. On Derm Complete for allergies.

Physical Examination: N/A.

Urinalysis: SG 1.024, 3+ protein.

CBC: Normal.

Serum Biochemistry: Elevated globulins and ALP activity.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Small urinary bladder with a normal appearance and thickness of the wall. Normal anechoic urine. Focal dependent hyperechogenic sediment/small urolith evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size with increased echogenic appearance, some loss of cortico-medullary differentiation, irregular capsule, and normal and pelvis. Bilateral cortico-medullary rim sign.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, size, and position.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, smooth curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size with a diffuse hyperechogenic appearance, and some loss of portal markings. Few faint hypoechogenic parenchymal nodules. No masses evident. Small gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristalsis, and no distension of the lumen.

Pancreas

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

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Renal disease.
- Hepatopathy.

Secondary findings:

- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

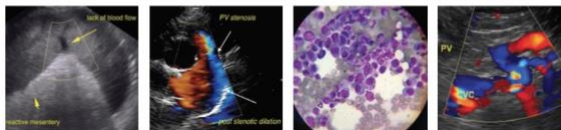
The appearance of the kidneys is consistent with early chronic kidney disease and possibly as a result of glomerulonephritis.

Etiologies for the hepatopathy would be reactive, vacuolar, early nodular regeneration, early cirrhosis, chronic hepatitis, with infiltrative neoplasia a far less likely differential diagnosis.

Although the urinary bladder sediment may be an incidental finding with the history, urolith reformation needs to be considered,

Further assessment would be urine culture, blood pressure, SDMA, FNA cytology of the liver, screening for vector-borne diseases, and possibly renal biopsy.

Management of the renal disease and proteinuria would be renal diet, clopidogrel or low-dose aspirin, and replacing benazepril with an angiotensin converting enzyme receptor blocker. Immune-suppressive therapy (prednisolone and/or cyclosporin) can also be considered.



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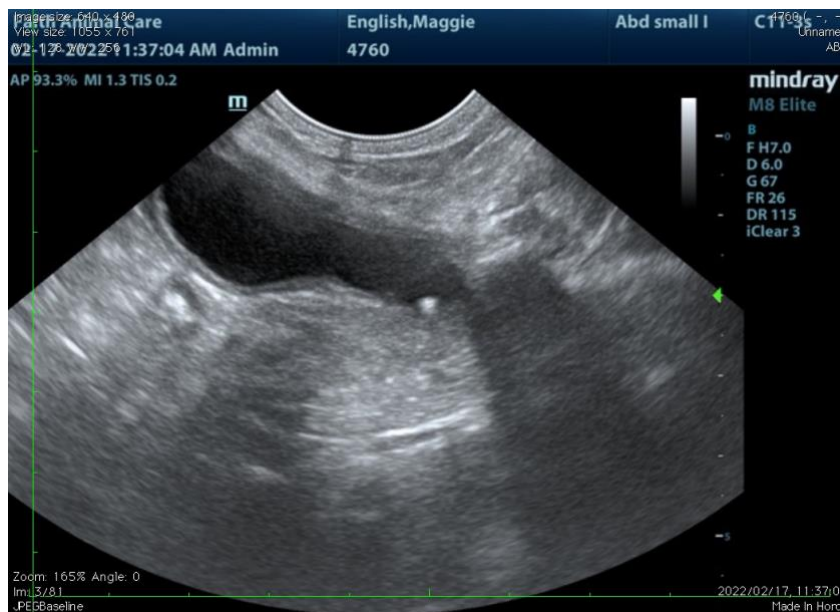
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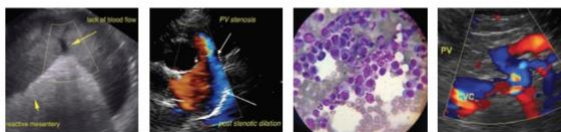
IMAGES

Urinary bladder



Left kidney





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Liver



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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.

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