



PATIENT

Sadie Ford

SPECIES

Canine

BREED

Border Collie

SEX

FS

AGE

13 Years

WEIGHT

24.7 kg

INTERPRETED BY

Sebastian Jawinski,
German Board Certified
Vet Specialist in
Diagnostic Imaging

IMAGING PERFORMED BY

Dr. Brian Barnes

HOSPITAL NAME

Westview Veterinary
Hospital

REFERRING VET

Dr. Brian Barnes

INVOICE

48991

DATE

12-13-21

PRESENTING CLINICAL SIGNS

Previous history of right kidney Obstructive hydronephrosis and hydroureter due to pelvic and ureteral calculi right side 2) Mild pyelectasia left renal pelvis. Dog is on Antibiotics, analgesics and stone diet and doing much better Rescan right kidney

Abnormal PE/Chem/CBC/UA Results: CBC WNL. Chem: Creat 219 (N 44-159) Prev 251, Urea 6.7 (N 2.5-159) Prev 12.7 SDMA 25 (N 0-14) Prev 12.7 U/A: USG 1.012, Bld 25, , WBC 8/HPF, RBC 1/HPF, Bac 0, Cast suspect Hyaline , Crystals neg

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary system

The urinary bladder presents small hyperechoic calculi with distal acoustic shadowing. Wall layering is intact on all views without focal or diffuse thickening.

Ureters are not visualized at the level of the trigone.

Distension of the right ureter is no longer present. The multiple calculi are not detected any more. The peripheral free (retro-) peritoneal fluid has gone.

The right renal pelvis is mildly distended with diameters of 0.67 cm (11/30/12 1.56 cm) presenting hyperechoic changes of the renal pelvis. The pelvic calculi are indicated. The perihilar and peri-ureteral tissue is inconspicuous.

The left renal pelvis still is mildly distended. A renal pelvic calculus is indicated causing distal acoustic shadowing (unchanged).

Adrenal glands

Both present normal size, shape and echogenic texture, phrenic vasculature is bilaterally unremarkable.

Spleen

The splenic echogenic texture is mildly inhomogeneous without protrusions of the capsule. Splenic vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins. There are no signs of nodular/focal changes noted.

Liver/Gallbladder

Liver images are age-appropriate and inconspicuous. Evidence of nodular or focal changes is not visible.

The gallbladder and -wall are unremarkable without signs of relevant sludge, a florid process or cholestasis.

Gastrointestinal

The stomach, the small intestine and colon present intact wall layers being normal in width and echogenicity. Adjacent mesentery and fat tissue are of normal appearance. There is no overt evidence of an ileus, a florid-inflammatory or even neoplastic process. Mesenteric, epigastric and portal lymph nodes are considered to be normal.

Free Abdomen

Abdominal fat and great vessels show no pathological findings.



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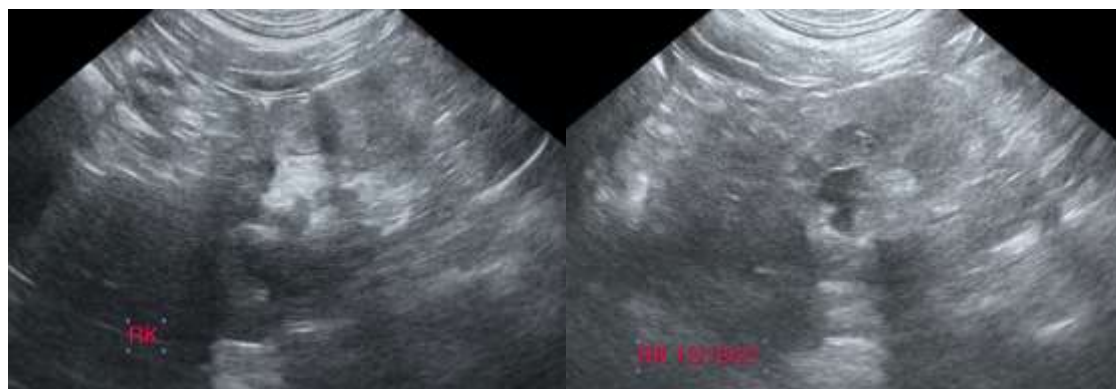
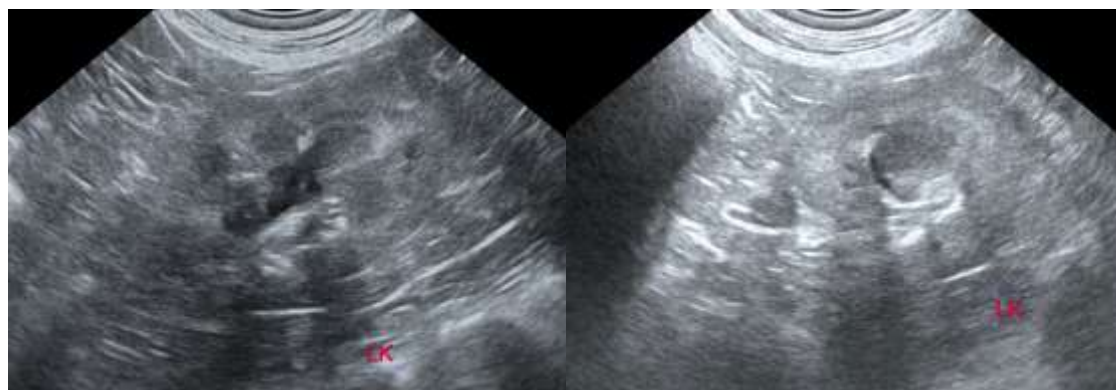
12-13-21

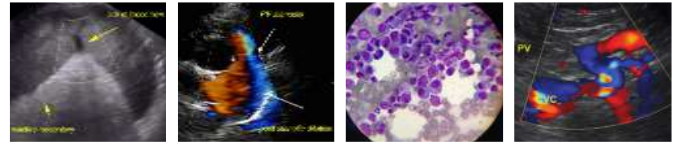
ULTRASONOGRAPHIC FINDINGS

- Significant improvement of the right hydronephrosis and hydroureter
- Bilateral renal/pelvic calcifications still present with mild pyelectasia
- Obstructive signs have resolved with calculi now detected in the urinary bladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sonographic recheck shows significant improvement of the findings detected on 11/30/21. The obstructive and severe inflammatory changes seem to have resolved. The ureteral calculi on the right at least partially reached the urinary bladder. Mild distension of both renal pelvises still is present but acute obstruction/leakage is longer suspected (stone diet as a long-term treatment/antibiotics and a sonographic recheck are recommended for/in another 2 weeks).





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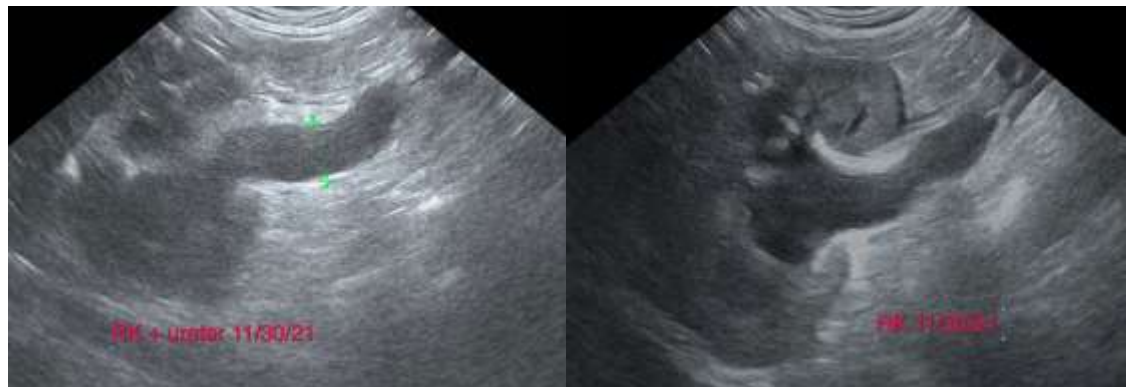
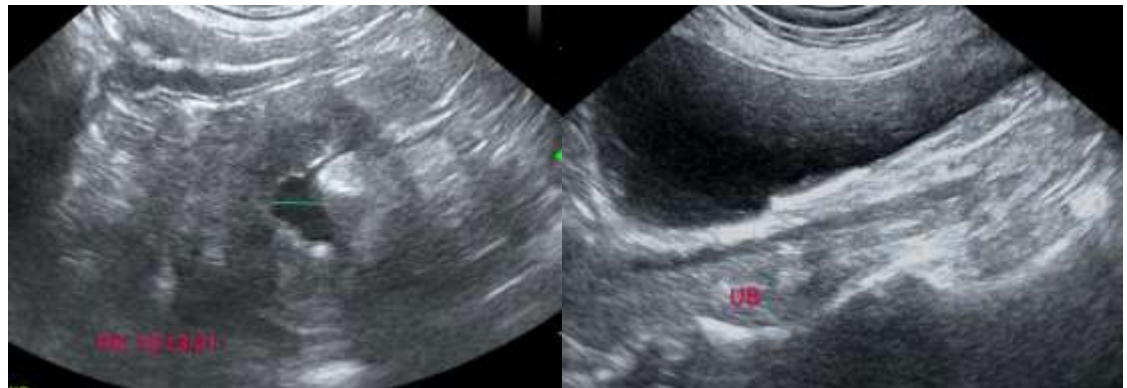
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com