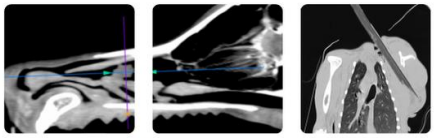

PATIENT

Kike (Tigre) Fernandez

SPECIES

Canine

BREED

Mixed Medium-Large Breed

SEX

M

AGE

7Y

WEIGHT

35.4lbs

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

José L. Alvarado Bruno, CVT - CT Scan Technician

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Lionel Ricci, DVM

INVOICE

74759

DATE

4-22-26

PRESENTING CLINICAL SIGNS

Patient referred for CT study due to suspicion of an abdominal mass or hydronephrosis. Patient tested positive for ehrlichiosis and heartworm disease.
Abnormal PE/Chem/CBC/UA Results: CBC --- UNREMARKABLE CHEM --- UNREMARKABLE

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

A pre- and post-contrast CT study of the abdomen is provided for review totaling 2 series. One pre-contrast series of the abdomen (soft tissue algorithm). One post-contrast series of the abdomen (soft tissue algorithm).

COMPUTED TOMOGRAPHIC FINDINGS

There is marked enlargement of the right kidney, which is severely distended and presents features consistent with advanced obstructive hydronephrosis. Only a thin peripheral rim of renal cortex and capsule is identifiable, with loss of normal corticomedullary differentiation and normal parenchyma. The right kidney measures approximately 16 cm in length x 7.8 cm widening and exerts a significant mass effect within the right hemiabdomen.

The right ureter is markedly dilated (megaureter), measuring approximately 4.0 cm in diameter proximally and 2.2 cm distally. The ureter follows an abnormal course and appears to extend toward or insert adjacent to the prostate, raising suspicion for ectopic ureteral insertion.

The left kidney is not identified, including absence of the renal hilum, left renal artery, and left renal vein, consistent with renal agenesis.

The prostate is normal in size and shape for an intact male, measuring approximately 3.1 × 2.6 cm.

The urinary bladder is moderately distended with homogeneous hypoattenuating content and has normal wall thickness.

The liver is homogeneously soft tissue attenuating and uniformly contrast-enhancing, with normal size and shape. The gallbladder, cystic duct, and common bile duct are within normal limits.

The spleen is homogeneously soft tissue attenuating and uniformly contrast-enhancing, with normal size and shape.

The pancreas, abdominal lymph nodes, and adrenal glands are within normal limits.

The serosal fat shows normal attenuation. No evidence of abdominal effusion is observed.

The gastrointestinal tract is normally distended but displaced due to the mass effect from the enlarged right kidney. The colon contains a moderate amount of heterogeneous fecal material and is also displaced laterally.

The testes are normal in size, shape, contour, and attenuation.

The lumbar vertebral column shows reduced (collapsed) or absent intervertebral disc spaces at T13–L1, L1–L2, L5–L6, and L6–L7, associated with multiple, multifocal spondylosis deformans. These findings are suggestive of block vertebrae formation. The L1 vertebral body exhibits characteristics of a hemivertebra.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe right-sided hydronephrosis with marked renal enlargement and near-complete loss of normal renal parenchyma, consistent with chronic obstructive uropathy.
- Marked right sided megaureter, with suspected ectopic ureteral insertion near or within the prostatic region.
- Absence of the left kidney and associated vasculature, most consistent with unilateral renal agenesis (less likely severe chronic atrophy).
- Marked mass effect in the right hemiabdomen secondary to the enlarged right kidney.
- Multifocal spondylosis deformans with associated intervertebral disc space collapse, suggestive of block vertebrae and L1 hemivertebra.

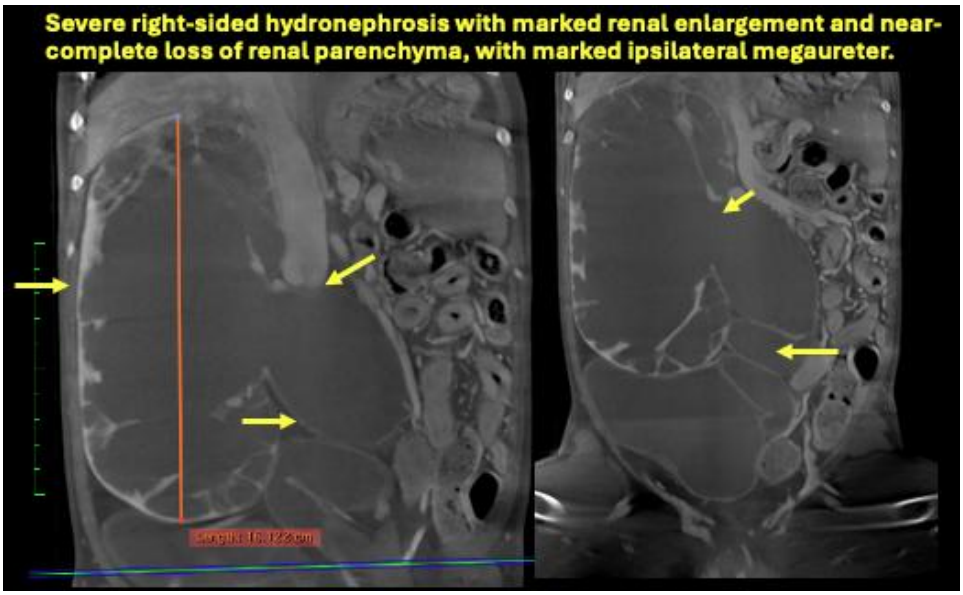
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are indicative of advanced, likely chronic, obstructive hydronephrosis affecting the right kidney, resulting in severe loss of functional renal parenchyma. The associated megaureter and suspected ectopic ureter strongly support a congenital or long-standing obstructive etiology.

The absence of the left kidney significantly impacts overall renal function and prognosis, as the patient appears to rely on a single, severely compromised kidney.

Correlation with renal function tests (including SDMA, creatinine, and urinalysis) is strongly recommended to assess residual renal function.

Long-term prognosis is guarded to poor, depending on residual renal function.



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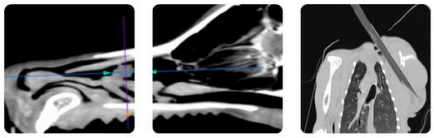

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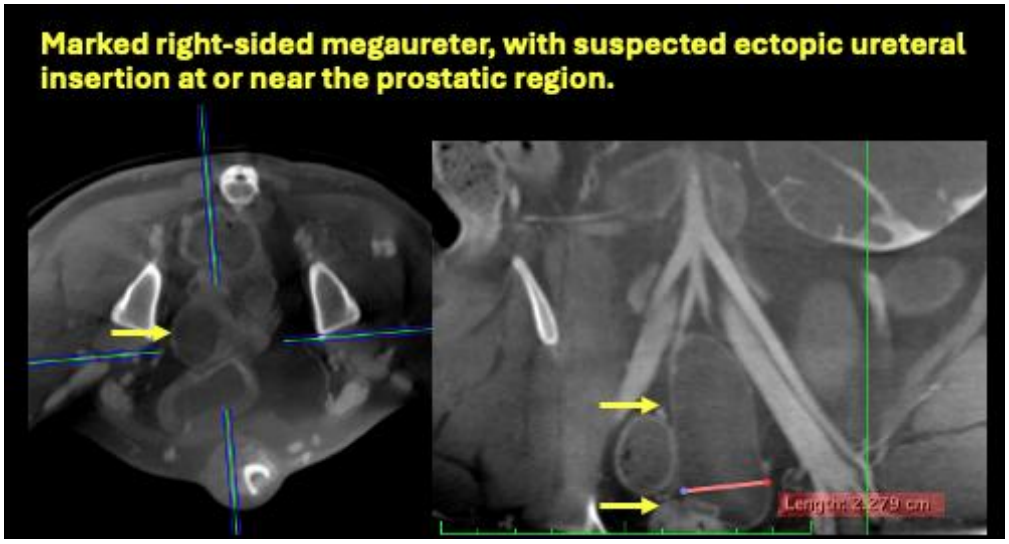

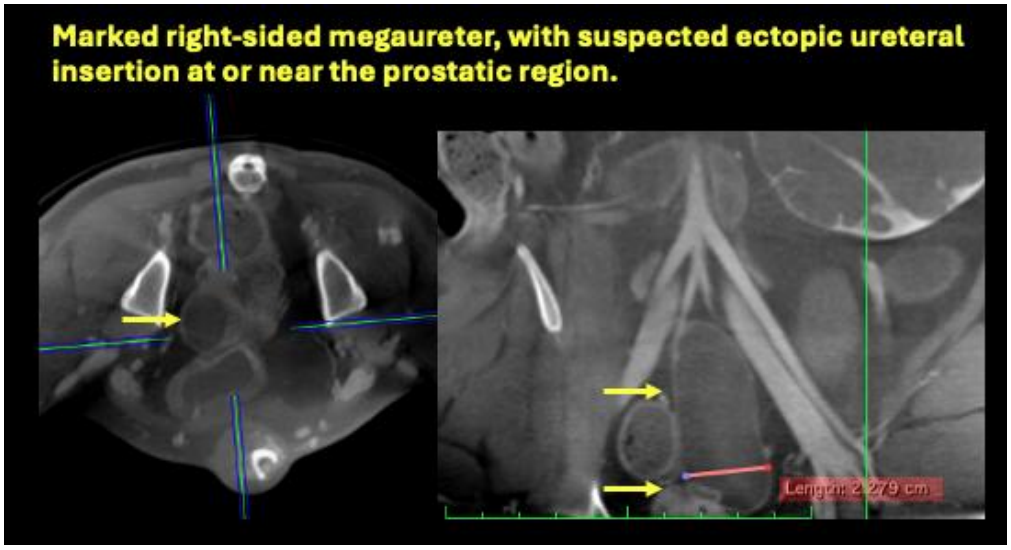

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com