

DATE PRESENTING CLINICAL SIGNS

10/18/2021

History: Pt presented on 10/2 for tapeworms. On PE - abnormality palpating in abdomen - firm structure mid abdomen. U/S - fluid filled, unable to locate kidney on that side. Recent adoption from shelter in May. Pt was spayed there. Pt showing no clinical signs that o is aware of.

PATIENT

Jade Marion

Current Medications: No current medications.

Lab Results: Not provided by the veterinarian.

Radiographs: Not provided by the veterinarian.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

SPECIES

Feline

Sedation: Not needed.

Stat Report: Not requested.

BREED

Domestic shorthair

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Female, spayed

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

AGE

2/26/2021

The left kidney is normal size (4.26 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

8.31 lbs.

The right kidney is enlarged (7.25 cm in length) and severely hydronephrotic. There is complete obliteration of the normal renal architecture and only a thin rim of capsule remains. A 0.64 cm hyperechoic shadowing structure is observed in the renal pelvis near the opening to the ureter. The proximal ureter is mildly dilated (0.35 cm) and tapers a few cm distal to the renal pelvis after which it no longer is visible. (

INTERPRETED BY

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Adrenal Glands

The left adrenal gland is normal in size (0.31 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.32 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

HOSPITAL NAME

Everhart VC

Spleen

The spleen is normal in size (0.82 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

REFERRING VET

INVOICE

12366

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. A 0.87 cm linear shadowing structure is observed within the lumen of a segment of jejunum. There is no luminal dilation in this region. The small intestinal wall is diffusely normal thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

Pancreas

The pancreas is normal in size with normal peripheral contours. The pancreatic duct is normal. The base and limbs of the pancreas are isoechoic to surrounding omental fat. No focal lesions are observed. There is no evidence of peripancreatic inflammation or effusion.

Free Abdomen

Trace free fluid is observed. A chain of prominent lymph nodes are observed in the mid to caudal abdomen, the largest measuring 1.32 cm in length. Surrounding mesentery is slightly hyperechoic.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Severe right hydronephrosis with mild proximal ureter. The cause of this finding is unclear. It may represent a congenital malformation, severe pyelonephritis, secondary to ureteral obstruction (i.e., suture from ovariohysterectomy, ureterolith, stricture), other.
- The prominent abdominal lymph nodes are likely reactive.
- The trace ascites is likely secondary right renal pathology.

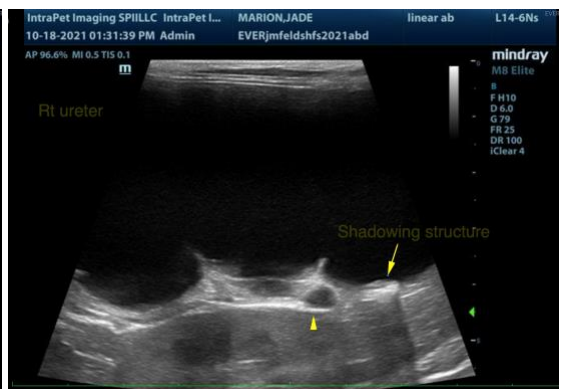
Secondary Findings:

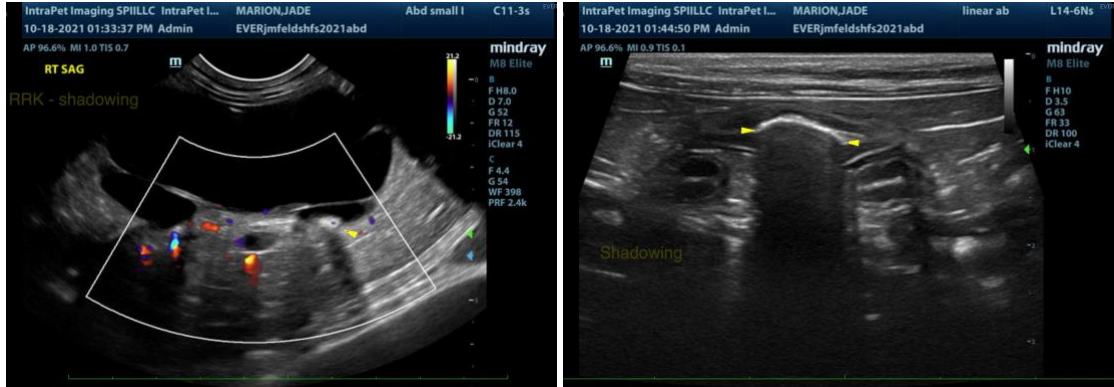
- The shadowing structure within the jejunal lumen likely represents non-obstructive transient foreign material.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A urine culture and sensitivity is recommended to assess for occult infection.
- Given that the right kidney is likely non-functional, a right nephrectomy should be considered. If surgery is pursued, referral to a board-certified veterinary surgeon is recommended.







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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