



## PATIENT

Dom C2593 Animals in Distress

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Neutered male

## AGE

9 years

## WEIGHT

9 lbs

## INTERPRETED BY

Dr. Alicia Angosto Guerrero

## IMAGING PERFORMED BY

Pamela Bay

## HOSPITAL NAME

For Cats Only VC

## REFERRING VET

Dr. Bay

## INVOICE

69210

## DATE

12/1/25

## PRESENTING CLINICAL SIGNS

History: Decreased appetite and weight loss. FIV +

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The bladder lumen is poorly distended, and the urinary bladder wall appears thin and smooth. The urine is mildly turbid. The proximal urethra and vesicoureteral junction have a normal appearance. There are no calculi and no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 4.28 x 2.96 cm, and the thickness of the cortex is 0.43 cm, in the sagittal plane. The renal cortex is slightly increased in echogenicity, resulting in increased corticomedullary distinction. No pyelectasia, nephroliths or hydronephrosis.

The right kidney is normal in shape and size: 4.60 x 3.09 cm, and the thickness of the cortex is 0.45 cm, in the sagittal plane. The renal cortex is increased in echogenicity, resulting in increased corticomedullary distinction. 3.89 mm pyelectasia, no nephroliths or hydronephrosis. Doppler color shows normal pattern.

### *Adrenal Glands*

The adrenal glands are not visualized.

### *Spleen*

Splenic thickness is 0.86 cm. The parenchyma demonstrates normal echogenicity and fine homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

### *Liver*

The liver is subjectively normal in size, with sharp edges and a regular contour. The liver parenchyma looks uniform and isoechoic compared to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The wall is thin, and the contents are primarily anechoic with a small amount of biliary sludge. The common bile duct measures 2.20–1.81–1.68 mm in its proximal portion.

### *Gastrointestinal*

The stomach is empty and folded, with mural thickness of 2.70 mm and preserved wall layering.



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Pylorus: 2.94 mm. Duodenum: 1.39 mm. Jejunum: 1.50 mm. Ileum: not visualized. Normal wall layering is present. The ileocecal junction was not visualized. No signs of obstruction, ileus, or foreign material are identified.

Colon: wall thickness not provided, with formed feces in the descending segment.

## ***Pancreas***

Pancreatic thickness is 6.04 mm. The right limb, body, and left limb appear normal. Pancreatic parenchyma is isoechoic to the adjacent omental fat. The pancreatic duct diameter is 1.32 mm. No signs of active inflammation or neoplastic disease are evident.

## ***Peritoneal Cavity***

No abdominal effusion or peritonitis is observed. Cranial mesenteric lymph nodes and ileocecal lymph nodes are not visualized, but the surrounding regions appeared unremarkable. The iliac trifurcation is normal.

## **ULTRASONOGRAPHIC FINDINGS**

- Bilateral renal cortical hyperechogenicity with increased corticomedullary distinction.
- Right renal pyelectasia (3.89 mm).
- Slightly turbid urine.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The abdominal ultrasound reveals bilateral renal cortical hyperechogenicity. These changes are consistent with chronic renal disease, although acute progression cannot be ruled out given the clinical signs.

The right kidney also shows mild pyelectasia (3.89 mm) without nephroliths or ureteral dilation, suggesting mild renal pelvic distension, most commonly associated with increased urine flow, early pyelitis, or renal concentrating defects. Infection cannot be excluded, especially in an FIV+ cat, even when debris or inflammatory cells are not prominent.

The urinary bladder contains slightly turbid urine, which may indicate crystalluria, proteinaceous debris, lipiduria, or early inflammation.

### Recommendations

- Complete urinalysis with sediment + urine culture, ideally cystocentesis, to evaluate for pyelonephritis or lower urinary inflammation.
- Baseline renal staging. SDMA, creatinine, blood pressure, and UPC ratio.





## PATIENT

Alicia Angosto Guerrero, DMV, PgDip, MSc.

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MV Esp Ultrasound in Domestic and Wild Animals

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