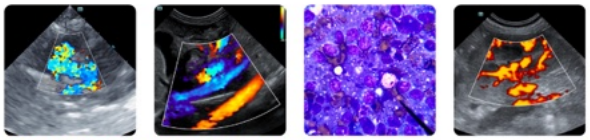


PATIENT

Mya Kidder

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Weaver

INVOICE

71178

DATE

2/3/26

PRESENTING CLINICAL SIGNS

- P presented 1/13/26 for chronic vomiting and inappropriate urination. P was started on clavamox for possible UTI and started on Royal canin urinary SO + HP diet. P is still vomiting and still inappropriately urinating, o elects to pursue ultrasound. Texas GI panel is pending.
- 1/13/26 CBC- neutrophils 1.67k/uL, 0.83 k/uL Chem/lytes and T4 WL 2/3/26 Texas A&M GI Panel (TLI, PLI, Cobalamin, Folate) sent out today CBC- WBC 2.3 k/uL, neutrophils 1.32 k/uL, lymp 0.66 k/uL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is normally distended. The bladder wall is thin and smooth. Urine initially appears anechoic; however, with patient repositioning, diffuse urinary turbidity becomes evident, without discrete mineral sediment or uroliths. The bladder neck and proximal urethra appear normal.

The left kidney is normal in shape and size, measuring 4.16×2.69 cm, with a cortical thickness of 0.40 cm in the sagittal plane. The renal cortex is isoechoic relative to the liver parenchyma. The corticomedullary ratio and corticomedullary distinction are preserved. No pyelectasia, nephrolithiasis, or hydronephrosis is observed. Color Doppler demonstrates a normal vascular pattern.

The right kidney is normal in shape and size, measuring 4.35×2.40 cm, with a cortical thickness of 0.42 cm in the sagittal plane. The renal cortex is isoechoic relative to the liver parenchyma. The corticomedullary ratio and corticomedullary distinction are preserved. No pyelectasia, nephrolithiasis, or hydronephrosis is observed. Color Doppler demonstrates a normal vascular pattern.

Adrenal Glands

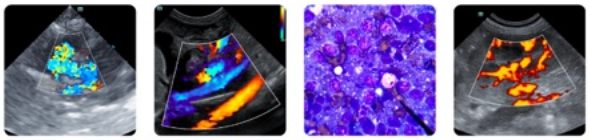
Both adrenal glands have normal shape and echogenicity. The left adrenal gland measures 0.30 cm at the cranial pole and 0.31 cm at the caudal pole. The right adrenal gland measures 0.31 cm at the cranial pole and 0.29 cm at the caudal pole.

Spleen

Splenic thickness is 1.0 cm. The splenic parenchyma demonstrates normal echogenicity and a fine, homogeneous echotexture without focal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp margins and a regular contour. The hepatic parenchyma is homogeneous and isoechoic relative to the falciform fat. Two small hyperechoic foci are identified within the right lateral liver lobe, measuring 3.41×4.29 mm and 3.85×3.96 mm. No hepatic lymphadenopathy is observed.



PATIENT

Mya Kidder

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Weaver

INVOICE

71178

DATE

2/3/26

The gallbladder is normally distended. The wall is thin. The lumen is primarily anechoic. No dilation of the cystic duct or common bile duct is identified.

Gastrointestinal

The stomach is empty and folded, with a wall thickness of 1.46 mm and preserved wall layering.

The duodenum measures 2.01 mm in wall thickness. The jejunum measures 2.50 mm. The ileum measures 1.15 mm. Wall layering is preserved throughout. The ileocecal junction measures 2.49 mm. No ultrasonographic evidence of gastrointestinal inflammation, ileus, or foreign material is identified.

The colon contains formed fecal material within the descending segment.

Pancreas

The evaluated portions of the pancreas show no ultrasonographic evidence of overt inflammation.

Peritoneal Cavity

No abdominal effusion or ultrasonographic evidence of peritonitis is observed. Cranial mesenteric and ileocecal lymph nodes are not visualized; the surrounding regions appear unremarkable. The iliac trifurcation appears normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Diffuse urinary turbidity without uroliths or bladder wall abnormalities.

SECONDARY FINDINGS

- Two small hyperechoic hepatic foci within the right lateral liver lobe.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most relevant urinary finding is diffuse urine turbidity, which becomes evident with patient repositioning. In the absence of uroliths, bladder wall thickening, or focal mural lesions, this finding is nonspecific and may reflect suspended cellular or proteinaceous material.

The gastrointestinal tract demonstrates normal wall thickness and preserved layering throughout the stomach and small intestine. These findings do not support inflammatory bowel disease, obstructive disease, or infiltrative neoplasia detectable by ultrasound. The pancreatic areas appear normal, recognizing that mild or chronic pancreatitis cannot be definitively excluded by ultrasonography alone.

Two small hyperechoic hepatic foci are identified and are most consistent with incidental benign changes, such as small nodular hyperplasia, myelolipoma or fibrosis.

PATIENT

Mya Kidder

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Weaver

INVOICE

71178

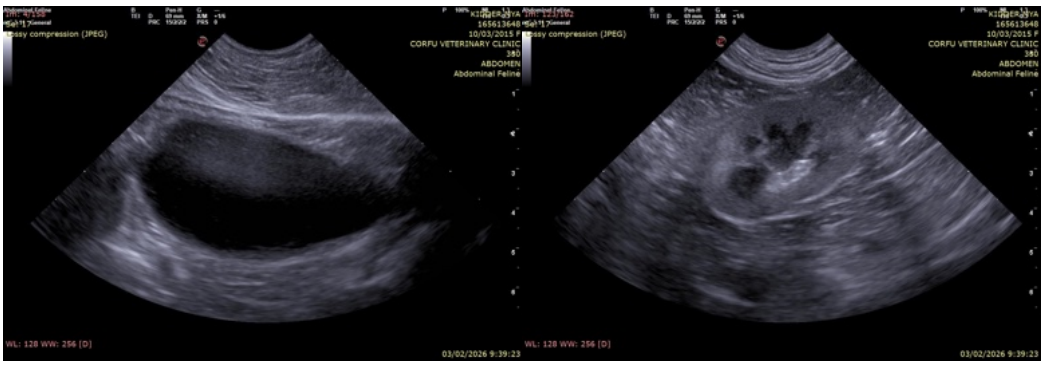
DATE

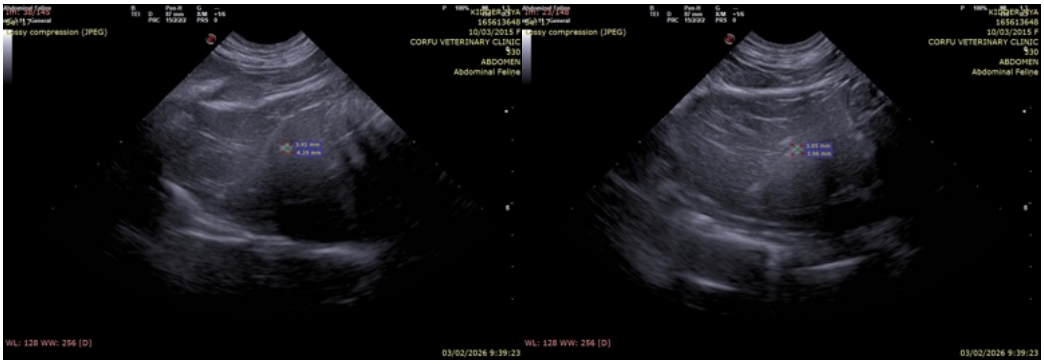
2/3/26

Given the persistent vomiting, inappropriate urination, and concurrent leukopenia with neutropenia, a functional, inflammatory, metabolic, or systemic process below the resolution of ultrasound remains a consideration.

Recommendations

- Correlate urinary turbidity with urinalysis and urine sediment examination, recognizing that ultrasonography cannot characterize the nature of suspended urinary material.
- Interpret gastrointestinal findings in conjunction with the pending Texas A&M GI panel, as no ultrasonographic evidence of structural gastrointestinal disease is identified.
- Given persistent vomiting and leukopenia, consider systemic or inflammatory causes (including infectious, immune-mediated, or metabolic disease) that may not be detectable by ultrasound.





PATIENT

Mya Kidder

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

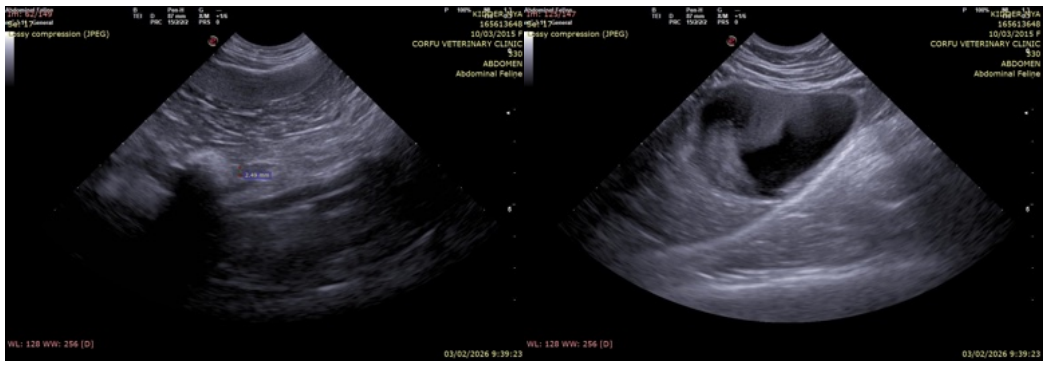
Dr. Weaver

INVOICE

71178

DATE

2/3/26



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

info@SonoPath.com