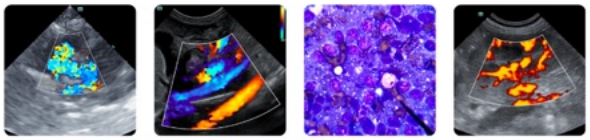


PATIENT

Roxie Velilla

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

4 years

WEIGHT

16 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Dr. Arms

HOSPITAL NAME

Gilbertsville VH

REFERRING VET

Dr. Reist

INVOICE

73468

DATE

3/12/26

PRESENTING CLINICAL SIGNS

- Presented for lower urinary tract signs (signs resolved with 3 days meloxicam)
- During exam palpated caudal abdominal mass
- Weight loss noted, unsure if intentional
- AXR - no mass seen usg 1061 (1015-1060), ph 7.5 (5.5-7), proteinuria 1+, upc (pending), struv 11-20, amorph phos 2-3 rest of labs NR

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is predominantly anechoic with scant suspended echoes. The bladder neck and proximal urethra have a normal appearance. No calculi are identified and there is no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size, measuring 4.42×2.03 cm, and the cortical thickness measures 0.40 cm in the sagittal plane.

The right kidney is normal in shape and size, measuring 4.19×2.59 cm, and the cortical thickness measures 0.56 cm in the sagittal plane.

In both kidneys, the cortex appears mildly hyperechoic compared to the hepatic parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

Adrenal Glands

The adrenal glands were not confidently visualized.

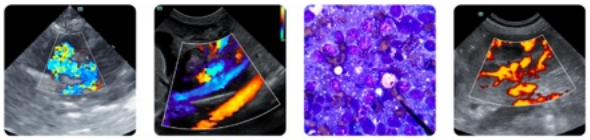
Spleen

Splenic thickness measures 0.72 cm. The 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 edges and a regular contour. The hepatic parenchyma appears uniform and isoechoic compared with 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. No dilation of the cystic duct or common bile duct is observed.



PATIENT

Roxie Velilla

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

4 years

WEIGHT

16 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Dr. Arms

HOSPITAL NAME

Gilbertsville VH

REFERRING VET

Dr. Reist

INVOICE

73468

DATE

3/12/26

Gastrointestinal

The stomach is mildly distended with small amounts of ingesta remaining within the lumen, with mural thickness measuring 1.92 mm and preserved wall layering. The duodenum measures 1.62 mm. The jejunum measures 1.80 mm and the ileum measures 1.55 mm, with normal wall layering. The ileocecal junction measures 2.13 mm. No sonographic evidence of inflammation, ileus, or foreign material is identified. The mucosal pattern with mildly increased peristalsis is consistent with active digestion.

The colon measures 0.87 mm with formed fecal material present in the descending segment.

Pancreas

The evaluated pancreatic regions do not demonstrate sonographic evidence of overt inflammation or neoplastic disease.

Peritoneal Cavity

No sonographic evidence of abdominal effusion, peritonitis, or lymphadenomegaly is identified. The iliac trifurcation region appears normal.

ULTRASONOGRAPHIC FINDINGS

- Mild bilateral renal cortical hyperechogenicity.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No intra-abdominal mass is identified on this examination. Given the clinical description of a palpable caudal abdominal structure and the absence of ultrasonographic or radiographic evidence of an intra-abdominal lesion, the palpable finding may represent organized subcutaneous fat or adipose tissue external to the abdominal wall, which can be prominent in overweight cats.

Both kidneys appear structurally normal, although the mild cortical hyperechogenicity noted may be related to fat deposition or vacuolar change in overweight patients, and is considered a nonspecific finding.

Mild suspended echoes are present within the urinary bladder lumen, which may correspond to urinary sediment. This finding is compatible with the crystalluria reported on urinalysis and may also explain the mild proteinuria, which could be secondary to urinary sediment or lower urinary tract inflammation.

Recommendations

- Correlation with the pending UPC is recommended to further characterize the proteinuria.

Further diagnostic and therapeutic decisions should be guided by the attending veterinarian based on the patient's clinical status.

PATIENT

Roxie Velilla

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

4 years

WEIGHT

16 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Dr. Arms

HOSPITAL NAME

Gilbertsville VH

REFERRING VET

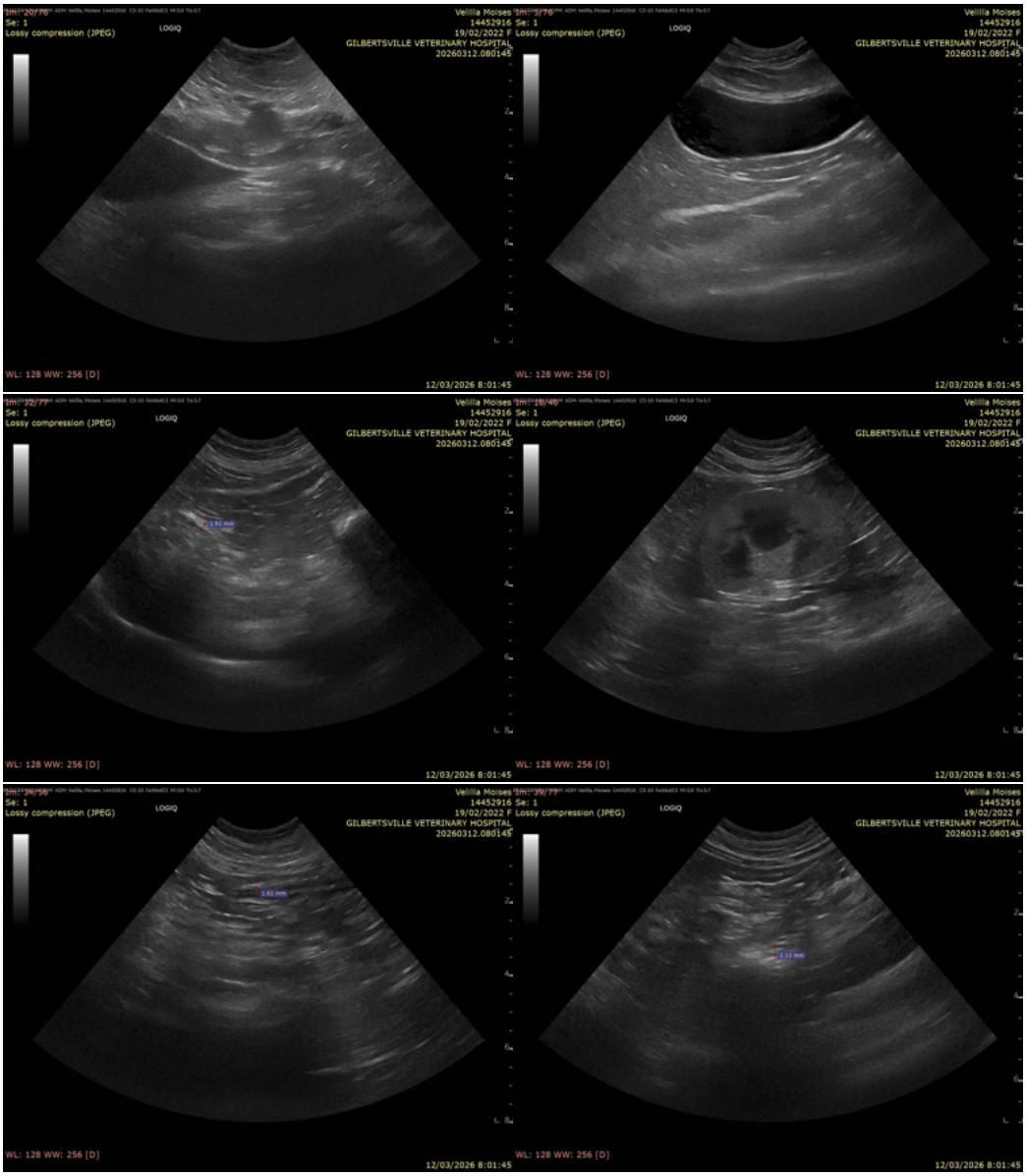
Dr. Reist

INVOICE

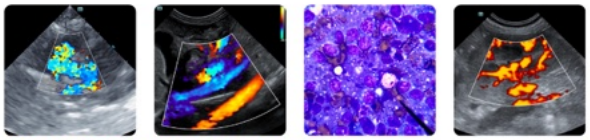
73468

DATE

3/12/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com | info@sonopath.com | 1.800.838.4268

PATIENT

Roxie Velilla

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

4 years

WEIGHT

16 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Dr. Arms

HOSPITAL NAME

Gilbertsville VH

REFERRING VET

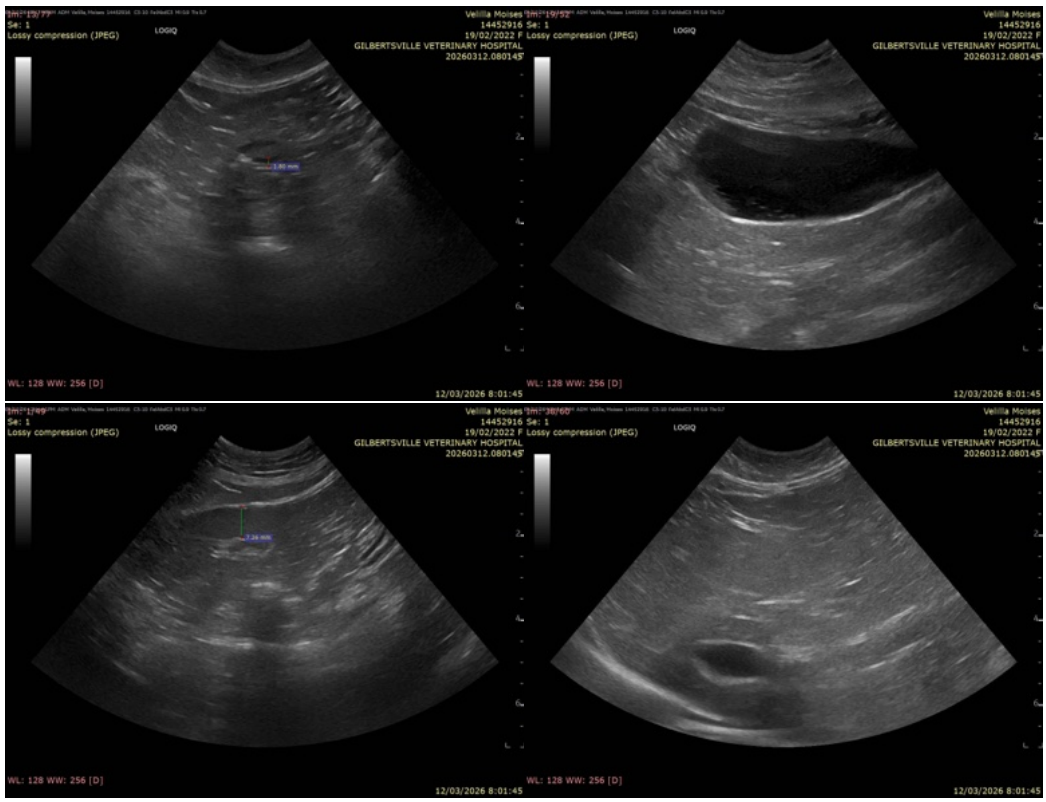
Dr. Reist

INVOICE

73468

DATE

3/12/26



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