

PATIENT

Bayley Warner

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Patient treated empirically for cystitis (antibiotic, off-label Cerenia) two weeks ago. In today for urine recheck.

SPECIES

Attempted Cystocentesis, US showed mass effect at the dorsal, Trigone area. Some faint densities in the U Bladder on lateral radiographs.

Feline

While bladder feels small, it is unusually firm.

BREED

Abdomen palpates soft and non-painful otherwise, with no organomegaly or masses appreciated, External Genitalia appears normal

DSH

Urinalysis - 1+ glucose (BG 131), 2+ hematuria, 1+ proteinuria, USG >1.050. pH 7.0.

SEX

Sedi-View Pyuria (> 40WBC / hpf
No crystals detected, rods suspected.

Spayed Female

Patient continues to strain after voiding.

Would like to get a board certified USonographer take a look to assure no mass effect.

AGE

Empirical treatment today and schedule US next week, or transfer to CVRC for evaluation tonight. Owner (Nia) would like it scheduled next week.

01/11/2018

Abnormal lab-work values: n/a

Current Medications: Prazosin, Cerenia, Onsior, Veraflox

WEIGHT

11.8 lbs

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. A small to moderate amount of echogenic to mineralized debris is observed within the lumen. No distinct cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2-3 cm, are normal.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM (*Small Animal Internal Medicine*)

The left kidney is normal in size (3.54 cm in length) with a normal shape, architecture and 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.

IMAGING PERFORMED BY

Andrea Nicastro, DVM,
Diplomate ACVIM (*Small Animal Internal Medicine*)

The right kidney is normal in size (3.51 cm in length) with a normal shape, architecture and 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.

HOSPITAL NAME

Southside AH

Adrenal Glands

The left adrenal gland is normal size (0.34 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

REFERRING VET

Dr. Michael Forcier

The right adrenal gland is normal size (0.43 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INVOICE

12124

Spleen

The spleen is normal in size (0.74 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.

DATE

2.2.23

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 portal vein to caudal vena cava ratio is approximately 1: 1.

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 mildly distended with ingesta. 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. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. The lumen of the descending colon contains shadowing fecal material. There is no evidence of an obstructive pattern.

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

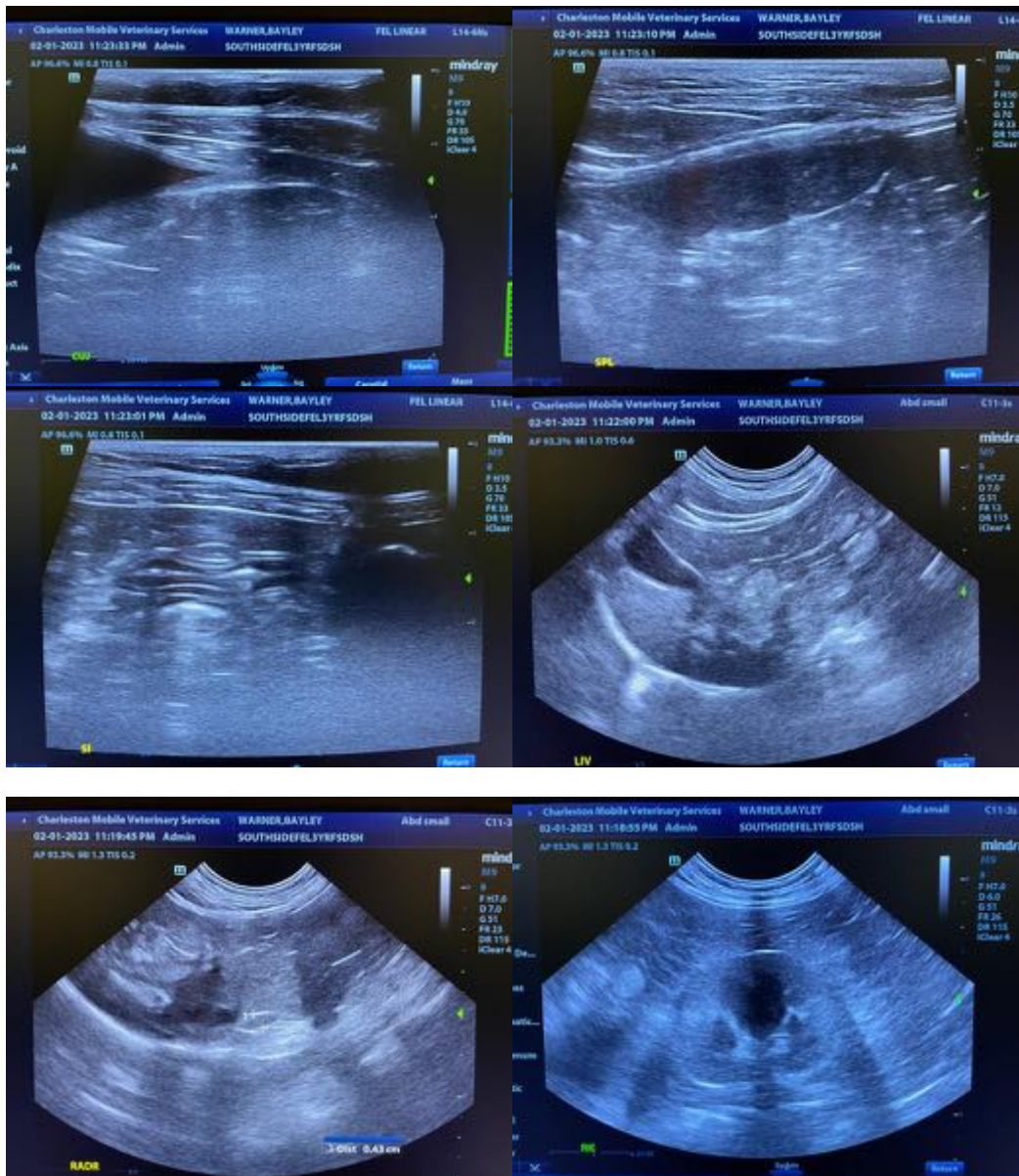
ULTRASONOGRAPHIC FINDINGS

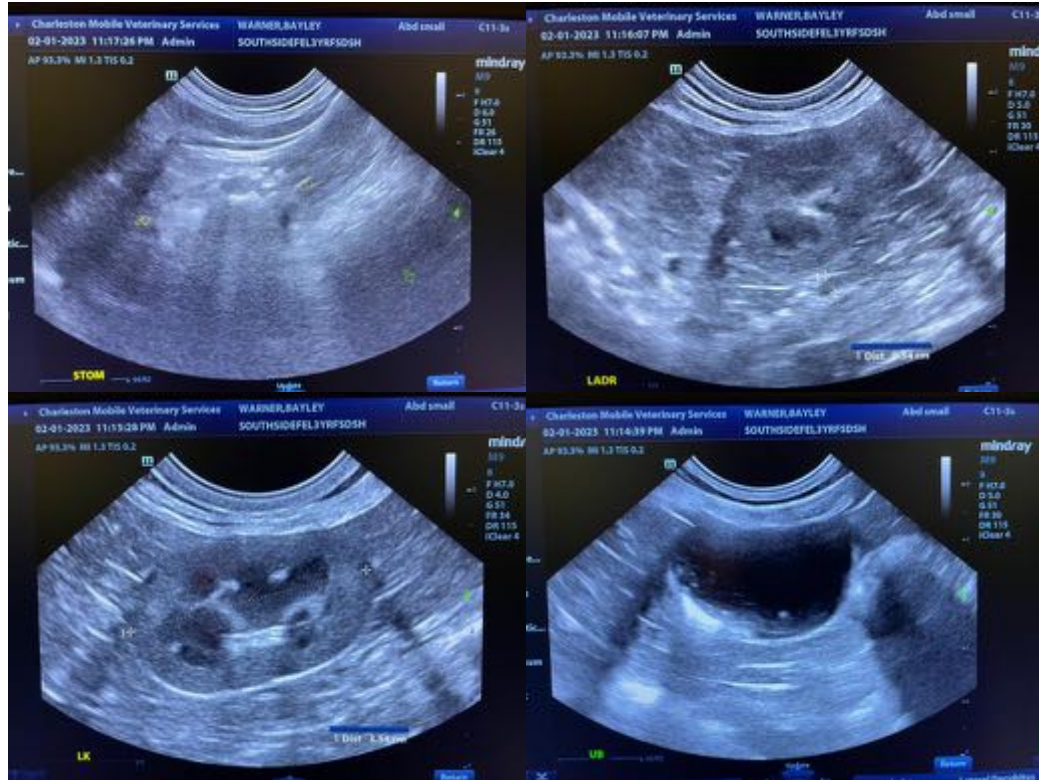
Primary Findings

- Urinary bladder debris with mineralized sand. These findings, in conjunction with the patient's clinical history, are suggestive of feline idiopathic cystitis. However, a urinary tract infection cannot be completely excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A urine culture and sensitivity is recommended (preferably on a pre-antibiotic sample).
- Empirical treatment for feline idiopathic cystitis is recommended, including anti-spasmodics, pain medication, +/- anti-inflammatories, along with environmental modification and promotion of an increase in water consumption.





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.

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