



PATIENT PRESENTING CLINICAL SIGNS

Midzy Eras History: Patient presents for incomplete ovariohysterectomy - possible ovarian remnant (one ovary never removed). Tense and painful caudal abdomen.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

BREED

Persian

SEX

Intact Female

The left kidney is normal in size (3.41 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.

AGE

2 years

The right kidney is normal in size (3.83 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.

WEIGHT

8.1 lbs

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 size (0.40 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

Andrea Nicastro, DVM,
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Spleen

The spleen is normal in size (0.86 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.

IMAGING PERFORMED BY

Kelly Vazquez

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.

HOSPITAL NAME

Animal General on
Hudson

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.

REFERRING VET

Dr. Dima

Gastrointestinal

The lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. 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 ileocecolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

INVOICE

12424

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.

DATE

3.15.23



PATIENT

Midzy Eras

Free Abdomen

There is no obvious evidence of free fluid. One to two colic lymph nodes are visualized (the largest measuring 0.80 cm in length).

SPECIES

Feline

Other

In the region of the left ovary, a 1.06 x 0.57 cm structure is visualized, which is thought to represent ovarian tissue.

BREED

Persian

The uterine body is visible and is normal in size (0.65 cm in width). The uterine bifurcation is also suspected to visualized with a small amount of fluid within the lumen of the ureteral horns.

ULTRASONOGRAPHIC FINDINGS

Findings

- Suspected retained left ovarian tissue and prominent uterine body/stump with suspected continuation to the uterine bifurcation.

SEX

Intact Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider vaginal cytology to evaluate for pyometra/stump pyometra.
- An anti-Müllerian hormone assay would be beneficial in further assessing for retained ovarian tissue.
- Ultimately, an abdominal exploratory with removal of the possible ovarian remnant and uterine stump may be warranted.

AGE

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WEIGHT

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HOSPITAL NAME

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REFERRING VET

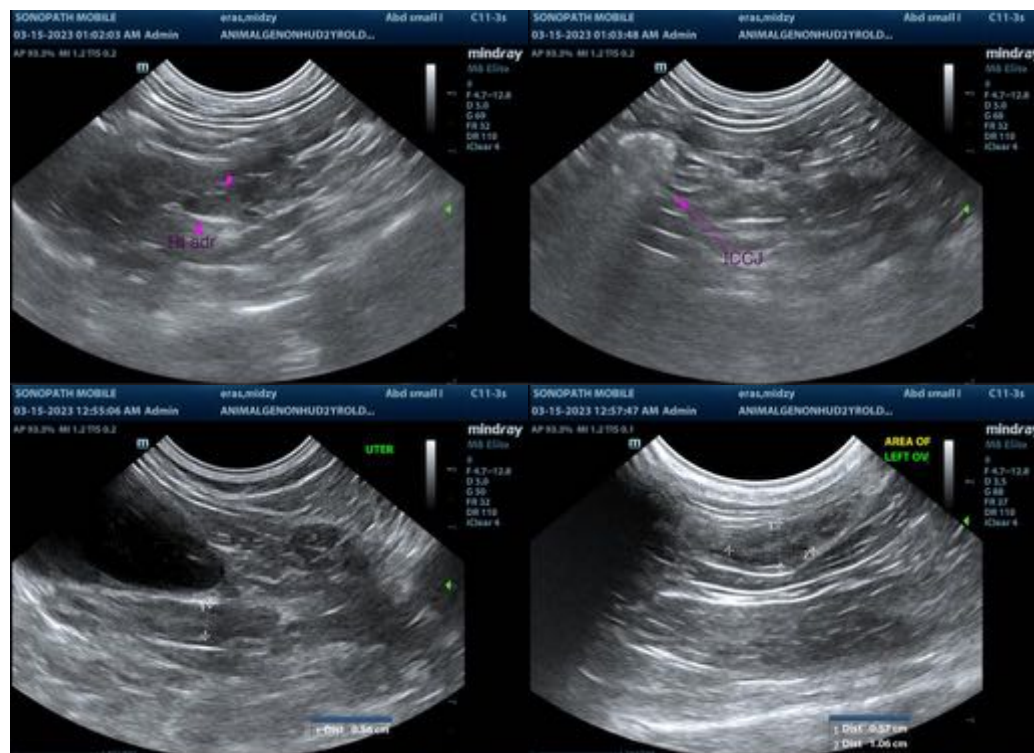
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SPECIES

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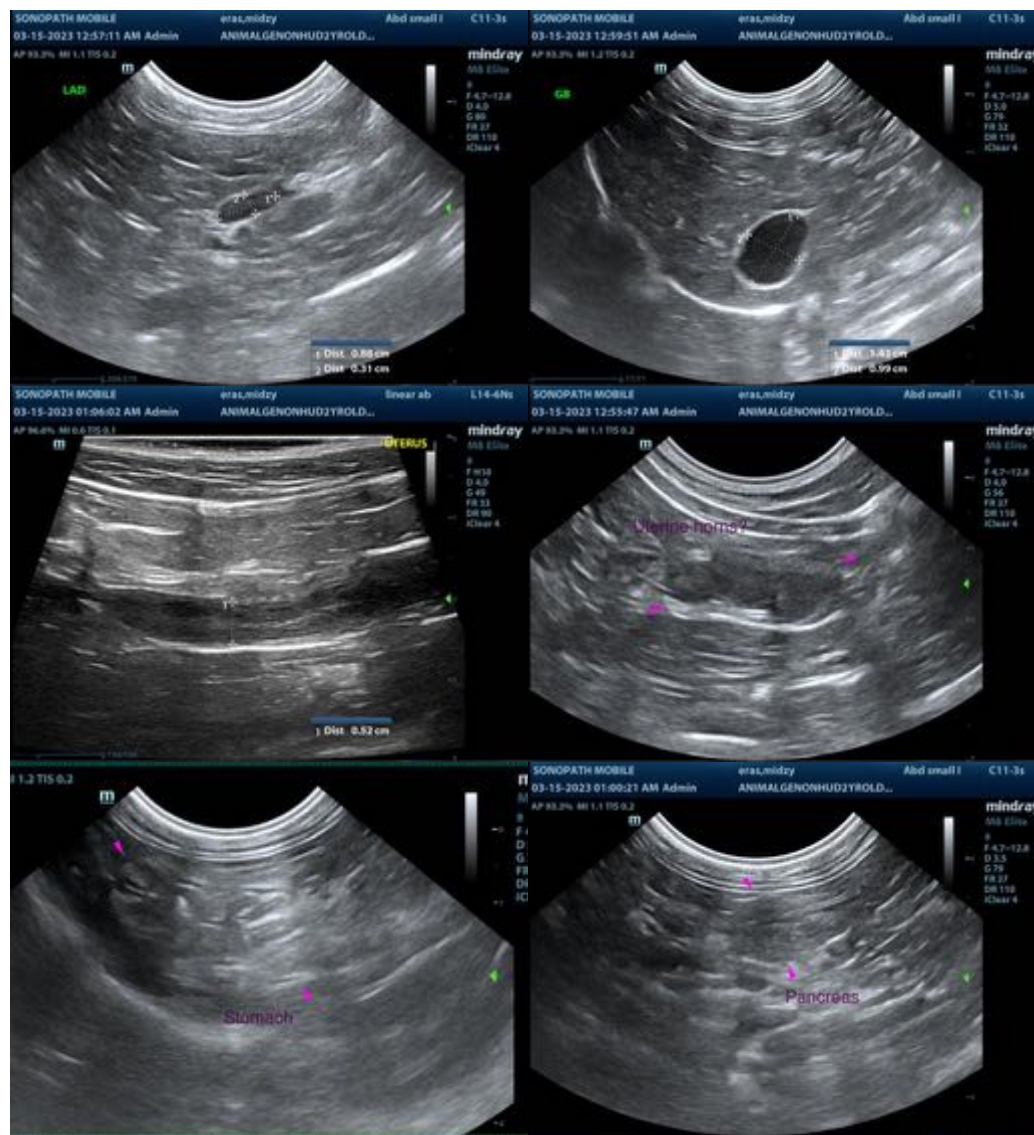
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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