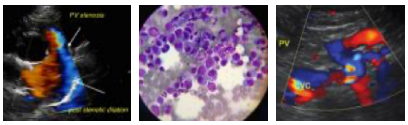
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE

4/11/22

PATIENT

Chick'n Garnreiter

SPECIES

Feline

BREED

Domestic shorthair

SEX

Female, spayed

AGE

11/30/2012

WEIGHT

8.1 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Eastern AH

REFERRING VET

Dr. Warner-Jones

INVOICE

13183

PRESENTING CLINICAL SIGNS

Multiple hematuria events. Suspicious mineralized area on radiographs. Position is static >>> less likely bladder stone, more likely bladder wall issue/mass with small mineralized center.

Current Medications: Convenia, Onsior, Buprenorphine. Gabapentin 50mg 2 hours prior to scan.
Radiographs: Static positioning of mineralization ventral bladder wall close to trigone.
Date of Previous IntraPet Ultrasound: No previous.

Sedation: IV Dexmedetomidine 0.10 cc and Butorphanol 0.10 cc.

Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. In the caudoventral aspect, a 0.8 cm focal area of wall thickening (up to 0.25 cm) with 2 foci of mineralization is observed. The remaining urinary bladder wall is normal in thickness with a smooth mucosal surface. No cystic calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney is borderline small in size (3.02 cm in length) with a slightly irregular shape. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. Trace pyelectasia is present. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (3.64 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size (0.45 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.45 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.66 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.

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 gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated echogenic suspended debris/sludge is observed within the lumen. The cystic and common bile ducts are normal.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. 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. There is disruption in the normal 1:3 muscularis: mucosal ratio in some segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.

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

There is no evidence of free fluid. A 0.42 cm colic lymph node is visualized.

Other

A brief echocardiogram reveals no obvious evidence of pericardial effusion.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Focal urinary bladder wall thickening at the caudoventral aspect. Differentials include inflammatory focus, granuloma (i.e., secondary to prior cystocentesis, if applicable), emerging neoplasia (i.e., transitional cell carcinoma), other.

Secondary Findings:

- Bilateral, non-specific age-related renal changes.
- Small intestinal wall pattern consistent with inflammatory bowel disease. However, correlation with clinical findings is recommended.
- The prominent colic lymph node is likely reactive with a low possibility of emerging neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If an aggressive approach is desired, a cystotomy with biopsy of the urinary bladder wall lesion can be considered. Alternatively, If a more conservative approach is desired, consider a repeat ultrasound in 3-4 weeks to assess for progression of the lesion.
- Baseline labwork including a CBC chemistry panel, urinalysis and T4 is also recommended, if not already performed.


IntraPet Imaging RBIILLC
garnreiter,chick'n
Abd small I
C11-3s
04-11-2022 10:07:02 AM Admin
EAHcgfeldshsf2012
mindray
RT
RK


IntraPet Imaging RBIILLC
garnreiter,chick'n
linear ab
L14-6Ns
04-11-2022 10:21:54 AM Admin
EAHcgfeldshsf2012
mindray
ICCJ

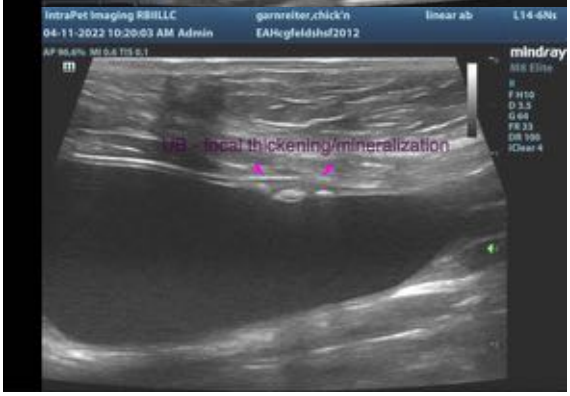

IntraPet Imaging RBIILLC
garnreiter,chick'n
Abd small I
C11-3s
04-11-2022 10:07:30 AM Admin
EAHcgfeldshsf2012
mindray
RT
Dist 0.45 cm
Rt adr


IntraPet Imaging RBIILLC
garnreiter,chick'n
Abd small I
C11-3s
04-11-2022 10:18:36 AM Admin
EAHcgfeldshsf2012
mindray
Lt Kidney
Dist 3.02 cm


IntraPet Imaging RBIILLC
garnreiter,chick'n
Abd small I
C11-3s
04-11-2022 10:18:36 AM Admin
EAHcgfeldshsf2012
mindray
Lt a
Dist 0.53 cm
Lt adr


IntraPet Imaging RBIILLC
garnreiter,chick'n
linear ab
L14-6Ns
04-11-2022 10:20:41 AM Admin
EAHcgfeldshsf2012
mindray
UB


IntraPet Imaging RBIILLC
garnreiter,chick'n
Abd small I
C11-3s
04-11-2022 10:08:07 AM Admin
EAHcgfeldshsf2012
mindray
Bladder
CUJ


IntraPet Imaging RBIILLC
garnreiter,chick'n
linear ab
L14-6Ns
04-11-2022 10:20:03 AM Admin
EAHcgfeldshsf2012
mindray
UB - focal thickening/mineralization

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

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com