



PATIENT PRESENTING CLINICAL SIGNS

Esme Delbridge-Ramos History: Intermittent hematuria for the last 18 months. Has never shown clinical signs of pain, lethargy, or dysuria. Urine cultures have been negative and normal CBC/Chem over the last 18 months. Last urine culture was April 2022. Concern for idiopathic cystitis or nephrolithiasis.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Normal PE, owner noted hematuria today.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Bengal

Urinary System

The **urinary bladder** wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of suspended, echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

SEX

Spayed Female

The **left kidney** is normal size (3.95 cm in length); normal shape and architecture with 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

7 years, 10 mos

The **right kidney** is normal size (4.20 cm in length); normal shape and architecture with 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

3.15 kg

Adrenal Glands

The **left adrenal gland** is normal size (0.20 cm cranial; 0.18 cm caudal; 0.89 cm length). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The **right adrenal gland** is normal size (0.30 cm cranial; 0.24 cm caudal; 1.17 cm length). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

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

Spleen

The **spleen** is normal in width (0.96 cm in width at the level of the hilus) and is somewhat elongated with normal curvilinear peripheral contours. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

IMAGING PERFORMED BY

Jolee Stegemoller, DVM

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

North ID AH/VCA

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

Jolee Stegemoller, DVM

Gastrointestinal

The **gastric lumen** is mildly distended with ingesta. 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 colonic wall is normal. There is no evidence of an obstructive pattern.

INVOICE

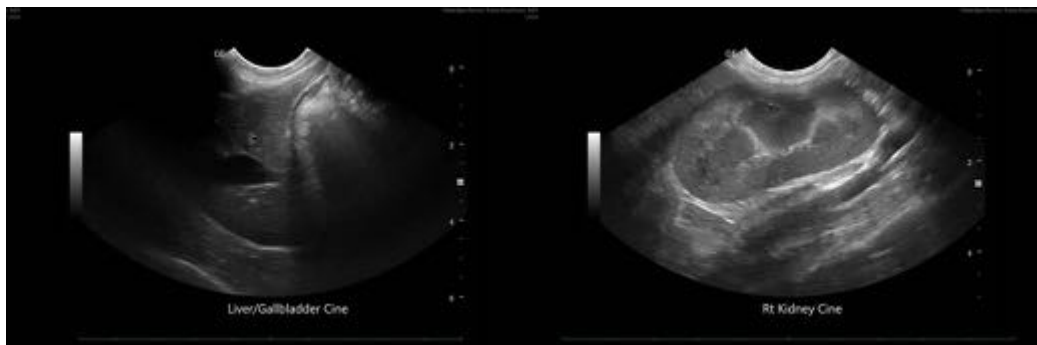
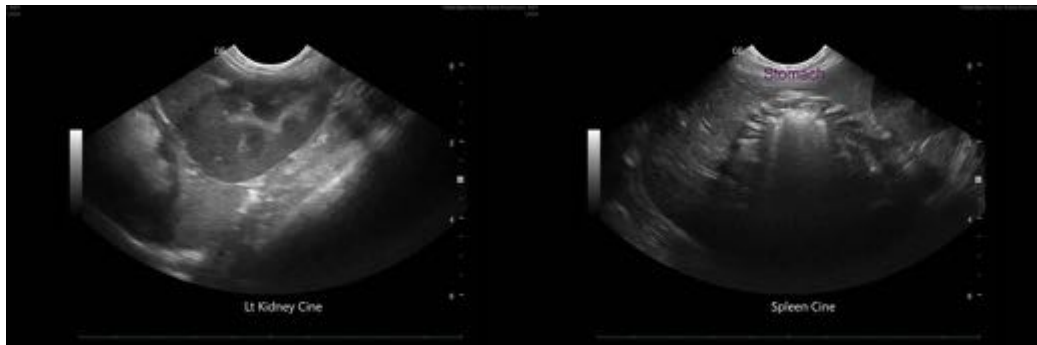
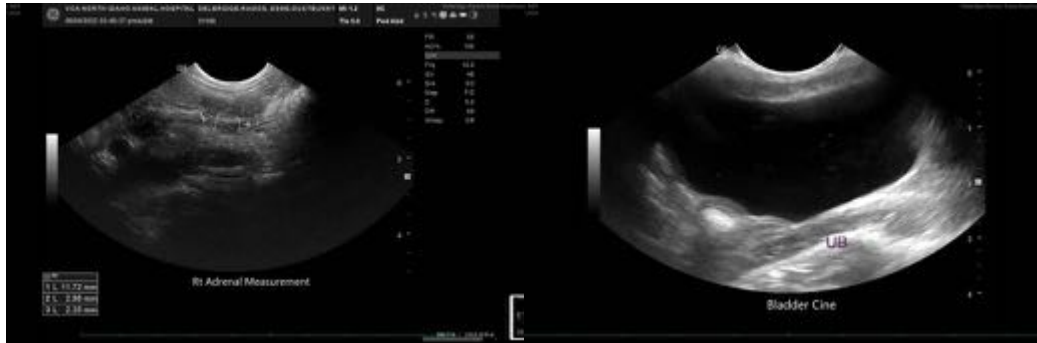
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Pancreas

DATE

The base and limbs of the **pancreas** are visible with normal curvilinear peripheral contours. The parenchyma is largely slightly hypoechoic relative to surrounding omental fat and slightly mottled in appearance. The

8.4.22



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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