



Sweetie Pie Carlston

PRESENTING CLINICAL SIGNS

History: Sweetie Pie had an ultrasound about 6 weeks ago. She is hyperthyroid and reactive to Methimazole. O is preparing for I-131 tmt in 3 weeks. Today, she presents for hematuria. This has been present, along with PU/PD for several months. Responsive to abx. This US is a follow up, prior to tmt. Sweetie Pie is still eating well. Recheck lab work is pending, including culture. Sweetie Pie is extremely difficult to medicate, thus the I-131 tmt and injectable abx.

SPECIES

Feline

BREED

Domestic shorthair

SEX

Female, spayed

AGE

12 Yrs.

WEIGHT

5.6 lbs.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is moderately distended. An echogenic area is observed along what is thought to be the left wall in the transverse video clip. No cystic calculi are observed. The region of the trigone appears normal. The proximal urethra is moderately dilated (up to 0.55 cm).

The left kidney is normal size (3.48 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (3.66 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The region of the left adrenal gland is evaluated. No obvious pathology is observed.

The right adrenal gland is normal in size (0.46 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.57 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 enlarged with irregular peripheral contours. Numerous varying sized cysts are observed throughout the organ, the largest measuring greater than 4 cm. Several of the cysts cause capsular expansion. One of the larger cysts contains echogenic debris. Others are multi-septated. Vascular and biliary tracts are of normal volume with no evidence of congestion. 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 gastric 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 ileoceocolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

Pancreas

A portion of the pancreas is obscured by the hepatomegaly. In the visualized portion of the left limb, the pancreas is visible/prominent with minimal deviation from the normal peripheral contours. The parenchyma is mildly hypoechoic relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is visible but not overtly dilated (0.19 cm in diameter).

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Velasco

HOSPITAL NAME

Bethany Family PC

REFERRING VET

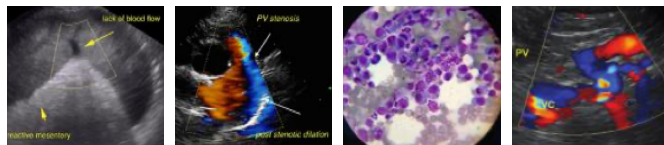
Dr. Harris/Velasco

INVOICE

15184

DATE

8/7/23



Sweetie Pie Carlston

Free Abdomen

Trace free fluid is observed. The abdominal lymph nodes are normal/not visible.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

BREED

Domestic shorthair

Primary Findings:

- The echogenic material observed along the urinary bladder wall is suspected to be gravity-dependent debris although inflammatory tissue or emerging neoplasia cannot be excluded.
- The moderately dilated urethra may be secondary to PU/PD or distal urethral obstruction (i.e., stone, tumor, other).

SEX

Female, spayed

Secondary Findings:

- Polycystic liver. Changes are similar to the previous sonogram.
- Mild bilateral chronic renal changes. Changes are similar to the previous sonogram.
- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended. Changes are similar to the previous sonogram.
- Trace ascites.

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WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If the urine culture and sensitivity is negative, consider the following:
 - Doppler flow on the echogenic area on the urinary bladder wall to determine if tissue vs. debris. Bladder agitation during the sonogram would also be useful.
 - Urine BRAF test to further evaluate for lower urinary tract neoplasia. Use of this test in cats is extra-label.
 - Also consider abdominal/pelvic radiographs to assess for distal urethroliths.

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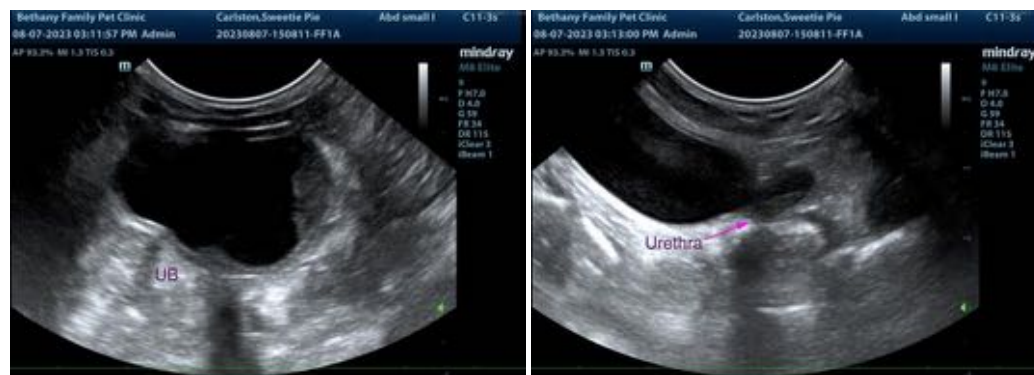
Dr. Harris/Velasco

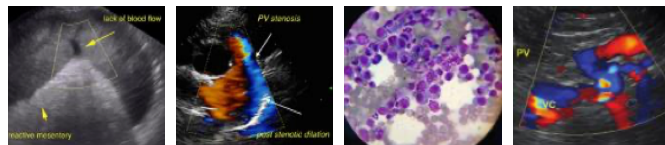
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PATIENT
Sweetie Pie Carlston

SPECIES

Feline

BREED

Domestic shorthair

SEX

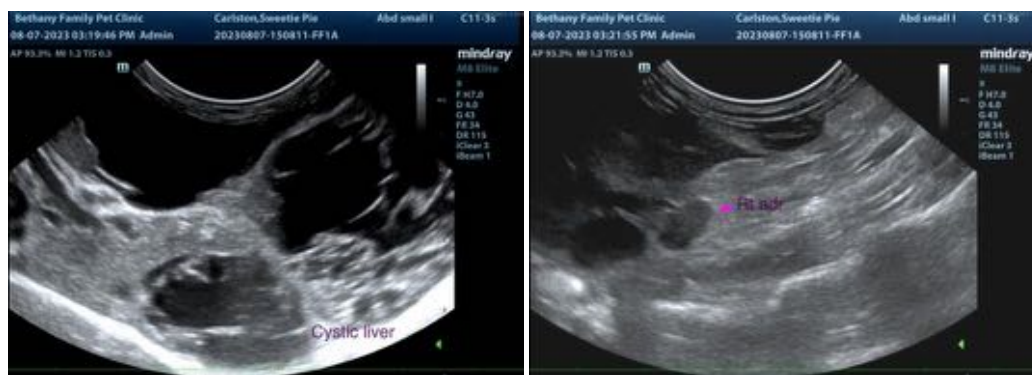
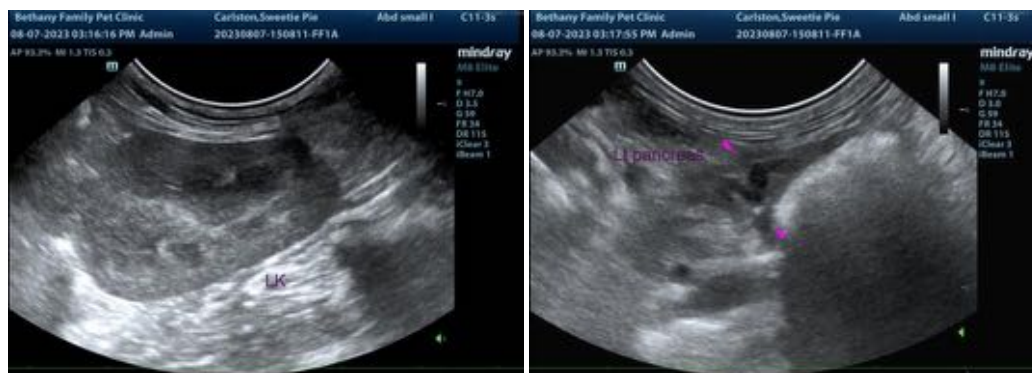
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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