

PATIENT PRESENTING CLINICAL SIGNS

PATIENT Marshal Scoppetta
SPECIES Feline
PRESENTING CLINICAL SIGNS History: Marshal is a new pet to us. O moved here a couple months ago and brought p to emergency clinic for hematuria. FIC/FLUTD was diagnosed. Sent home with urinary diet, prazosin, and bup. Still occurring on/off. Cat will absolutely not eat any kind of urinary diet. Presented today for establishing work up including bw, ultrasound, and treatment. Today's urine looked like strawberry lemonade. Abnormal PE/Chem/CBC/UA Results: Hyperthyroid under control, hx of CKD, 2 teeth remaining, hematuria

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Tabby
Urinary System

The urinary bladder is mildly distended. The wall is normal in thickness for the level of repletion. The mucosal surface is smooth. A small amount of suspended echogenic debris is observed within the lumen. In addition, a 0.32 cm aggregation of mineralized sand is present. The region of the trigone and the visible portion of the proximal urethra are normal.

SEX

Neutered Male
 The left kidney is normal size (4.02 cm in length); normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. Trace pyelectasia is present. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

AGE

17 Years
 The right kidney is normal size (4.31 cm in length); normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. Trace pyelectasia is present. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

9.2 Pounds
Adrenal Glands

The region of the adrenal glands is evaluated and no obvious pathology is observed.

INTERPRETED BY

Andrea Nicastro, DMV,
 Diplomate DACVIM
 (Small Animal
 Internal Medicine)

Spleen

The spleen is normal in size (0.88 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 slightly swollen peripheral contours. The parenchyma is isoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion.

HOSPITAL NAME

Bethany Family PC

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.

REFERRING VET

Charlie Rodriguez

Gastrointestinal

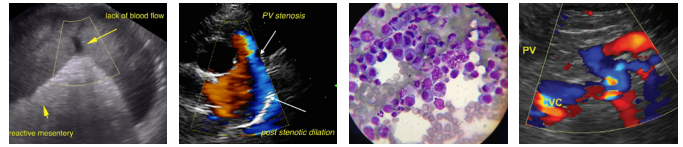
The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

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PATIENT *Pancreas*

Marshal Scoppetta

The left limb of the pancreas is visible/prominent with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

SPECIES *Free Abdomen*

Feline

There is no evidence of free fluid. There is no evidence of inflammation or effusion. A few prominent mid abdominal lymph nodes were visualized, the largest measuring 2.24 cm in length.

ULTRASONOGRAPHIC FINDINGS

BREED

Tabby

Primary Findings

- Urinary bladder debris with an aggregation of mineralized sand
- Bilateral age-related renal changes with dystrophic mineralization

SEX

Neutered Male

Secondary Findings

- Hepatic changes are non-specific and could be consistent with hepatic lipidosis, inflammatory/infectious disease, infiltrative neoplasia, other hepatopathy or normal variant.
- 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.
- The prominent abdominal lymph nodes are most consistent with reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.

AGE

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WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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(Small Animal
Internal Medicine)

- A urine culture and sensitivity is recommended.
- Consider abdominal radiographs to determine if the aggregation of mineralized sand represents a discreet stone, although it does not appear to be so sonographically.
- If there is no evidence of a cystic calculus and the urine culture is negative, continue therapy for feline idiopathic cystitis is recommended.

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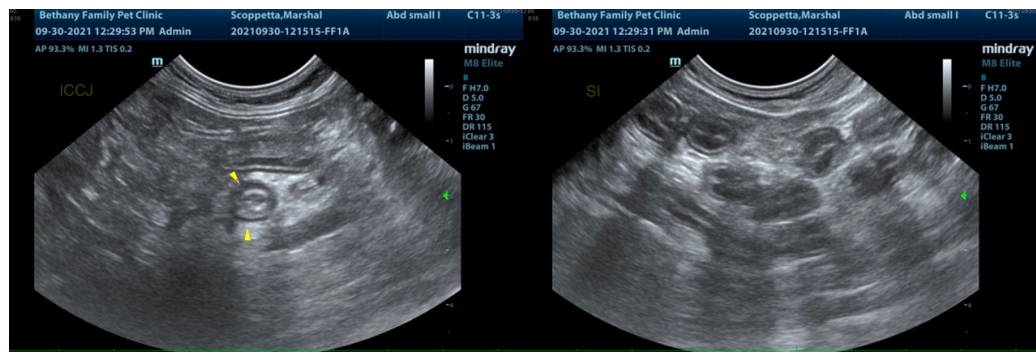
Charlie Rodriguez

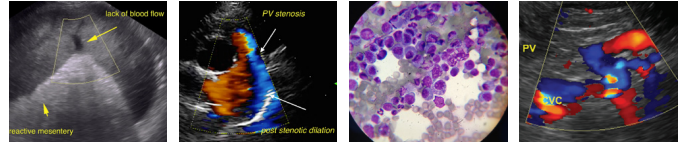
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SPECIES

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Neutered Male

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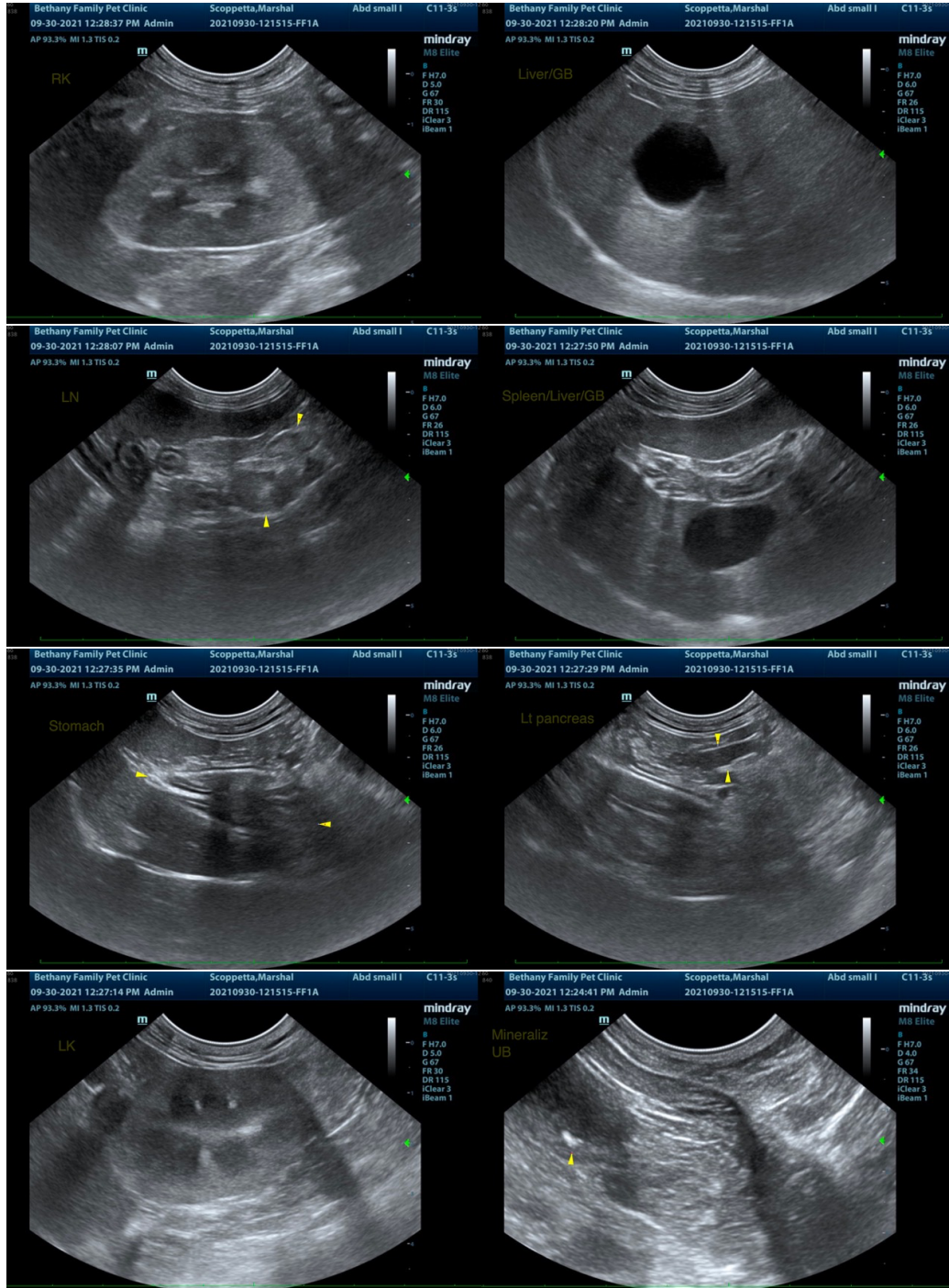
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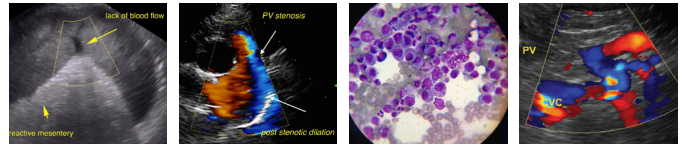


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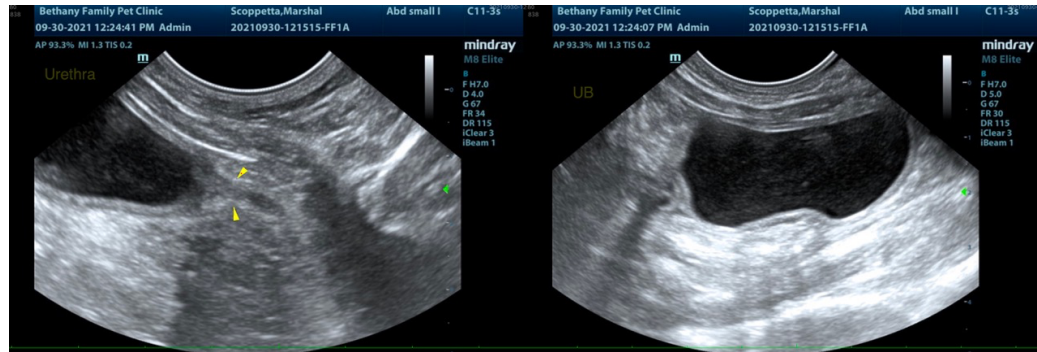
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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