



**PATIENT PRESENTING CLINICAL SIGNS**

Oreo Kosanovic

History: Severe obesity. Recurrent urinary issues, approx every 2mths. Has had many rounds of antibiotics (mostly Convenia). In 2019 had x-rays, culture, and U/S. In January again had culture showing bacteria, Baytril worked well, repeat culture negative. As per owners went to another vet in January also and had an x-ray that showed no bladder stones. In Feb rechecked, BW WNL, and got Convenia again. Started having urinary signs again

**SPECIES**

Feline

**BREED**

Domestic shorthair

**SEX**

Female, spayed

**AGE**

8 yrs.

**WEIGHT**

11.1 kg.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney is normal size (4.35 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (4.60 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 hydroureter. Renal vasculature is normal.

*Adrenal Glands*

The left adrenal gland is normal in size (0.38 cm length; 0.28 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.37 cm length; 0.31 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

*Spleen*

The spleen is normal in size (0.69 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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

*Gastrointestinal*

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly distended with ingesta. 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 segmentally dilated

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kelly Reshny, RVT

**HOSPITAL NAME**

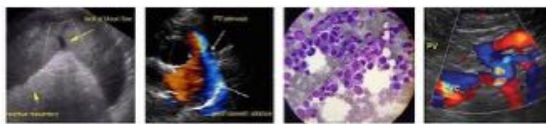
Beattie Pet Hospital  
Stoney Creek

**REFERRING VET**

Dr. Mellish

**DATE**

4/19/22



**PATIENT**

Oreo Kosanovic

with chyme. 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.

**SPECIES**

Feline

**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.

**BREED**

Domestic shorthair

**Free Abdomen**

A 3-3.5 cm area of ill-defined reactive mesentery is observed in the mid-abdominal region. The abdominal lymph nodes are normal/not visible.

**SEX**

Female, spayed

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

8 yrs.

- Minor age-related renal changes.
- The significance of the reactive mesentery in the mid-abdomen is unclear but suggests a focal peritonitis, possibly resolving.

**WEIGHT**

11.1 kg.

\*An obvious cause for the patient's clinical signs is not identified in this study. Considerations include a resistant urinary tract infection, idiopathic cystitis, other.

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- A repeat urine culture and sensitivity is recommended. If negative, empirical treatment for idiopathic cystitis should be considered.
- Consider a repeat ultrasound in 2-3 weeks to reassess the area of reactive mesentery.

**IMAGING PERFORMED BY**

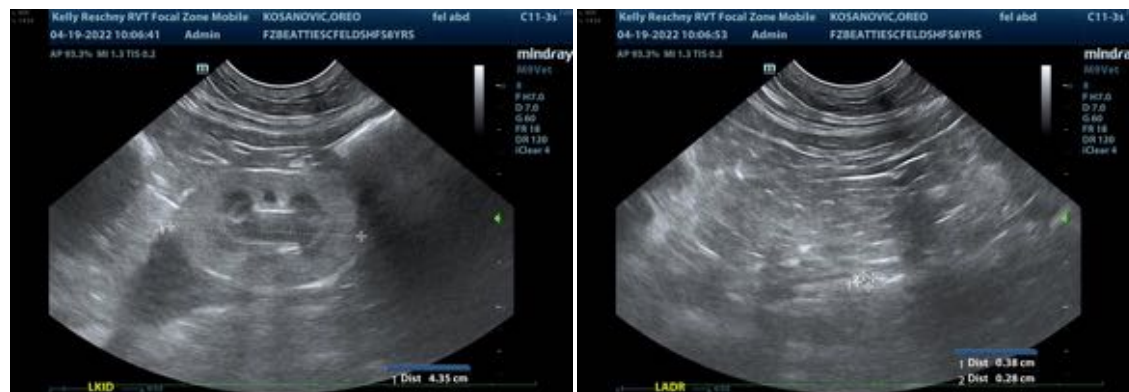
Kelly Reshny, RVT

**HOSPITAL NAME**

Beattie Pet Hospital  
Stoney Creek

**REFERRING VET**

Dr. Mellish



**DATE**

4/19/22



**PATIENT**

Oreo Kosanovic

**SPECIES**

Feline

**BREED**

Domestic shorthair

**SEX**

Female, spayed

**AGE**

8 yrs.

**WEIGHT**

11.1 kg.

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

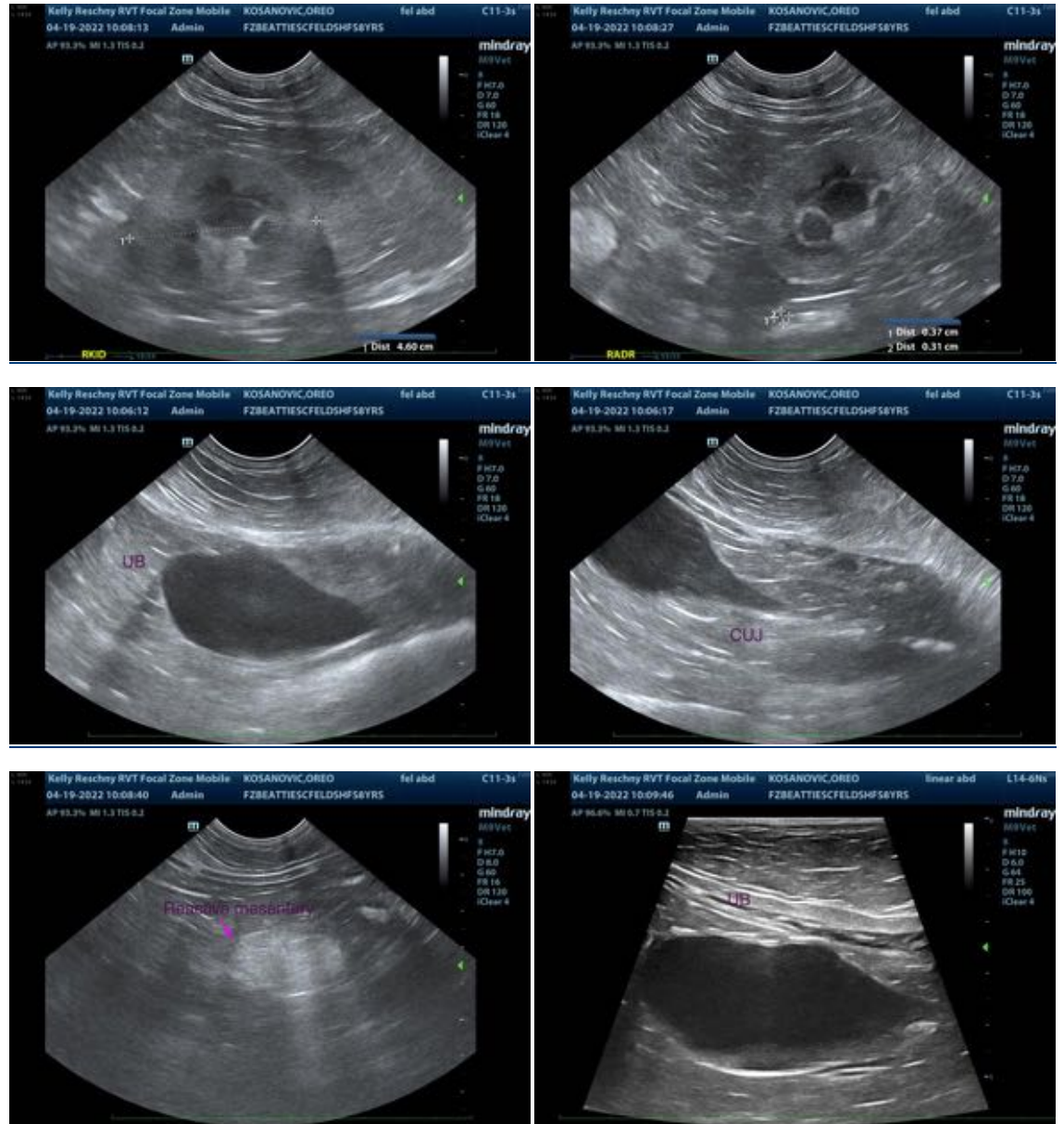
Kelly Reshny, RVT

**HOSPITAL NAME**

Beattie Pet Hospital  
Stoney Creek

**REFERRING VET**

Dr. Mellish



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.

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

Andrea.nicastro@sonopath.com

**DATE**

4/19/22