



PATIENT PRESENTING CLINICAL SIGNS

Ruby Sankey dribbling urine, straining in box Hx of constipation, but has been well controlled with cisapride and PEG
 Abnormal PE/Chem/CBC/UA Results: UTI on cysto sample Mild azotemia Mod leukocytosis present

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

DSH

SEX

Spayed Female

The left kidney is normal in size (3.2 cm) and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased echogenicity and mild loss of corticomedullary distinction. There is no evidence of pyelectasia, mineral (unless described separately) or infarcts observed.

AGE

14 Years

The right kidney is normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased echogenicity and mild loss of corticomedullary distinction. There is no evidence of pyelectasia, mineral (unless described separately) or infarcts observed.

WEIGHT

3.03 kg

Adrenal Glands

Right adrenal gland is normal in size (0.77 cm long x 0.34 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Left adrenal gland is normal in size (0.60 cm long x 0.30 thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Spleen

Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

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Liver

Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

REFERRING VET

Dr. Singh

Gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

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34044

Gastrointestinal

The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. A small amount of anechoic fluid is present. There is no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

DATE

1/6/22



PATIENT

Ruby Sankey The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

SPECIES

Feline The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

BREED *Pancreas*

DSH Pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

SEX *Free Abdomen*

Spayed Female There is no evidence of peritoneal effusion. There is a mid abdominal mass measuring 1.3 cm x 0.78 cm that is hypoechoic and homogeneous. It is most consistent with a lymph node.

ULTRASONOGRAPHIC FINDINGS

AGE

14 Years

- Age related kidney change – This finding is expected/consistent with age-related mild degenerative disease and should be interpreted clinically in combination with laboratory changes.
- Mid abdominal mass – Appears most consistent with a lymph node. Bowel mass cannot be ruled out, but is considered less likely.

WEIGHT

3.03 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Beth Johnson, DVM
DACVIM

This patient's clinical signs of dribbling urine are most likely related to the reported urinary tract infection. Recommendations include treating the urinary tract infection, including follow up urine culture one week after finishing antibiotics to be sure the infection is fully cleared, and monitoring for improvement in clinical signs.

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Other recommendations include a fine needle aspirate of the mid abdominal mass/suspected lymph node if patient's coagulation status is appropriate. 3-view thoracic radiographs recommended to further assess cardiopulmonary status and look for metastatic disease.

REFERRING VET

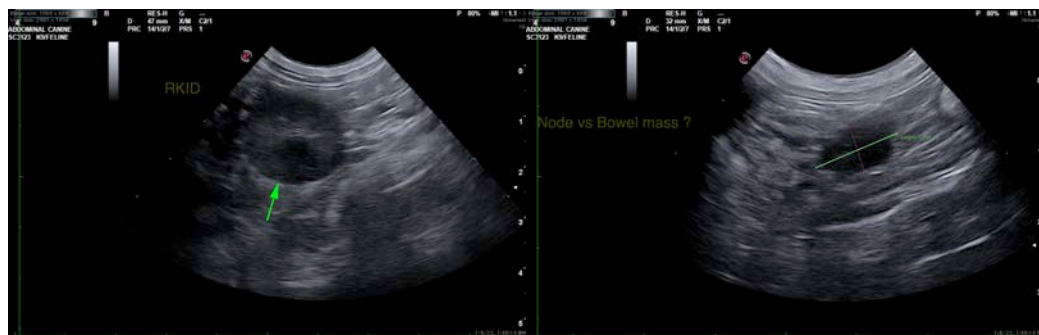
Dr. Singh

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PATIENT

Ruby Sankey

SPECIES

Feline

BREED

DSH

SEX

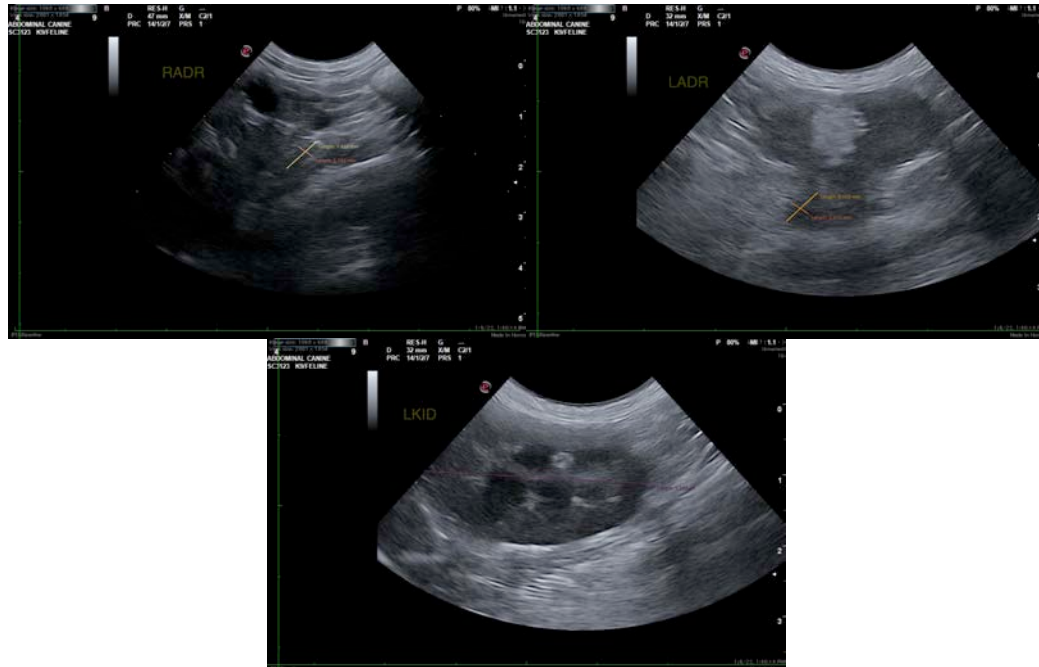
Spayed Female

AGE

14 Years

WEIGHT

3.03 kg



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.

INTERPRETED BY

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HOSPITAL NAME

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REFERRING VET

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