



**DATE PRESENTING CLINICAL SIGNS**

2/1/22 History: Boots presented today for pollakiuria and stranguria. An abdominal x-ray was taken and shows some possible stones in the bladder. Bloodwork and a u/a are being sent out.

**PATIENT**

Boots Conner

Current Medications: Prazosin 0.5mg bid, buprenex 0.1ml BID.

Lab Results: Attached separately.

Radiographs: Attached separately.

**SPECIES**

Feline

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**BREED**

DLH

**LIMITED ULTRASONOGRAPHIC EXAMINATION**

**Urinary System**

The urinary bladder is moderately distended with anechoic contents. At least 4 calculi exhibiting distal acoustic shadowing are settled along the dependent wall of the urinary bladder and entering the proximal urethra, measuring between 0.24-0.25 cm in diameter. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

**SEX**

Neutered Male

**AGE**

2/28/12

The right kidney is normal in size (4.47 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**WEIGHT**

15.5 Pounds

The left kidney is normal in size (4.13 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**ULTRASONOGRAPHIC FINDINGS**

- Urinary bladder cystic calculi (at least two appear to entering the proximal urethra)

**IMAGING PERFORMED BY**

Rachel Brilhart RDMS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Given the presence of these calculi combined with the reported stranguria, there is concern for impending urethral obstruction. Recommendations include a urine culture if not already performed, followed by removal of the stones. Voiding urohydropropulsion could be considered in a heavily sedated or anesthetized male cat, but is considered unlikely to be successful based on the size of the stones. However, the procedure could result in pushing the stones back into the urinary bladder, where a cystotomy could then be performed to remove and analyze them.

**HOSPITAL NAME**

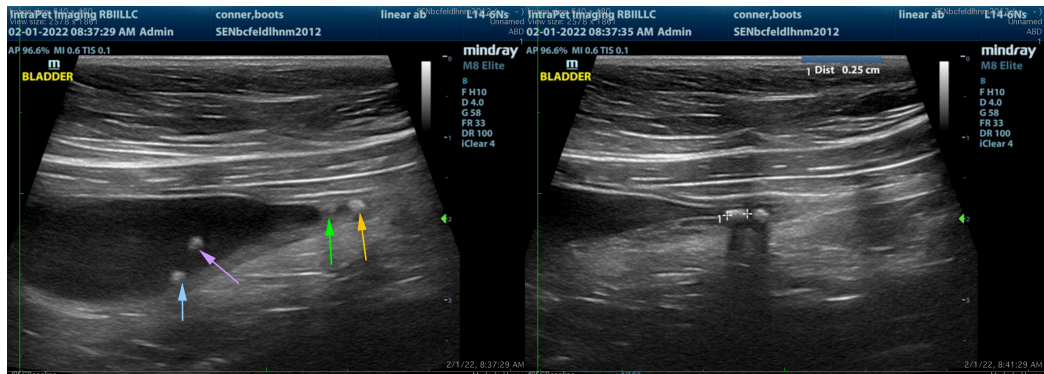
Cat Sense Feline AH

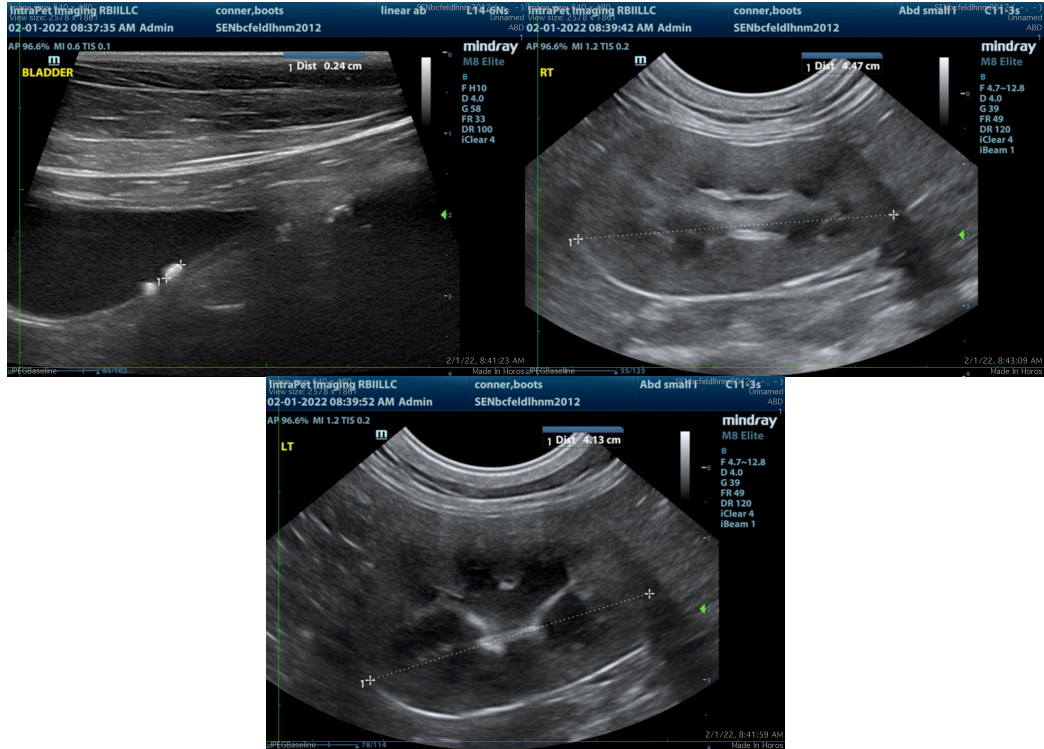
**REFERRING VET**

Dr. Sinclair

**INVOICE**

35347





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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