

**DATE**

3/10/22

PRESENTING CLINICAL SIGNS

History: Constipation, recently increased urination.

PATIENT

Jinx Mondragon

Current Medications: None listed.

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: IM Torb.

SPECIES

Feline

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

Urinary bladder is moderately distended. It has a normal uniform wall thickness (<0.2 cm). Contents include primarily anechoic fluid combined with suspended echogenic non-shadowing debris within the fluid. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

SEX

Neutered Male

AGE

10/5/09

The bilateral kidneys are 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 infarcts observed. Very mild renal pelvis dilation was present, measuring 0.2 cm in the sagittal view on the left and 0.24 cm in the sagittal view on the right. The left kidney measures 3.88 cm. The right kidney measures 3.9 cm.

WEIGHT

15.7 Pounds

Adrenal Glands

Left adrenal gland is normal in size (0.41 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BYBeth Johnson, DVM
DACVIM

Right adrenal gland is normal in size (0.37 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

HOSPITAL NAME

Bayside AMC

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.

REFERRING VET

Dr. DeLozier

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.

INVOICE

14253

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.

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 empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

Normal layering is maintained except for a diffusely disproportionately thick muscularis layer relative to mucosa- this is a very mild change. 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.

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

Pancreas

The pancreas is visible and mildly irregular in shape with a diffusely coarse echotexture and heterogeneous to hyperechoic echogenicity. There is no evidence of hyperreactive peripancreatic tissue or fluid. There is no evidence of pancreatic duct overdistention.

Free Abdomen

There is no appreciable lymphadenopathy or free fluid present in these images.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Urine changes are most consistent with incidental suspended lipid in a cat, however, cellular debris or crystalluria cannot be ruled out and should be interpreted in combination with urinalysis results.
- Thick muscularis. This finding has been reported in cats with infiltrative bowel disease including both benign inflammatory disease as well as infiltrative neoplasia such as lymphoma. This is a mild change.

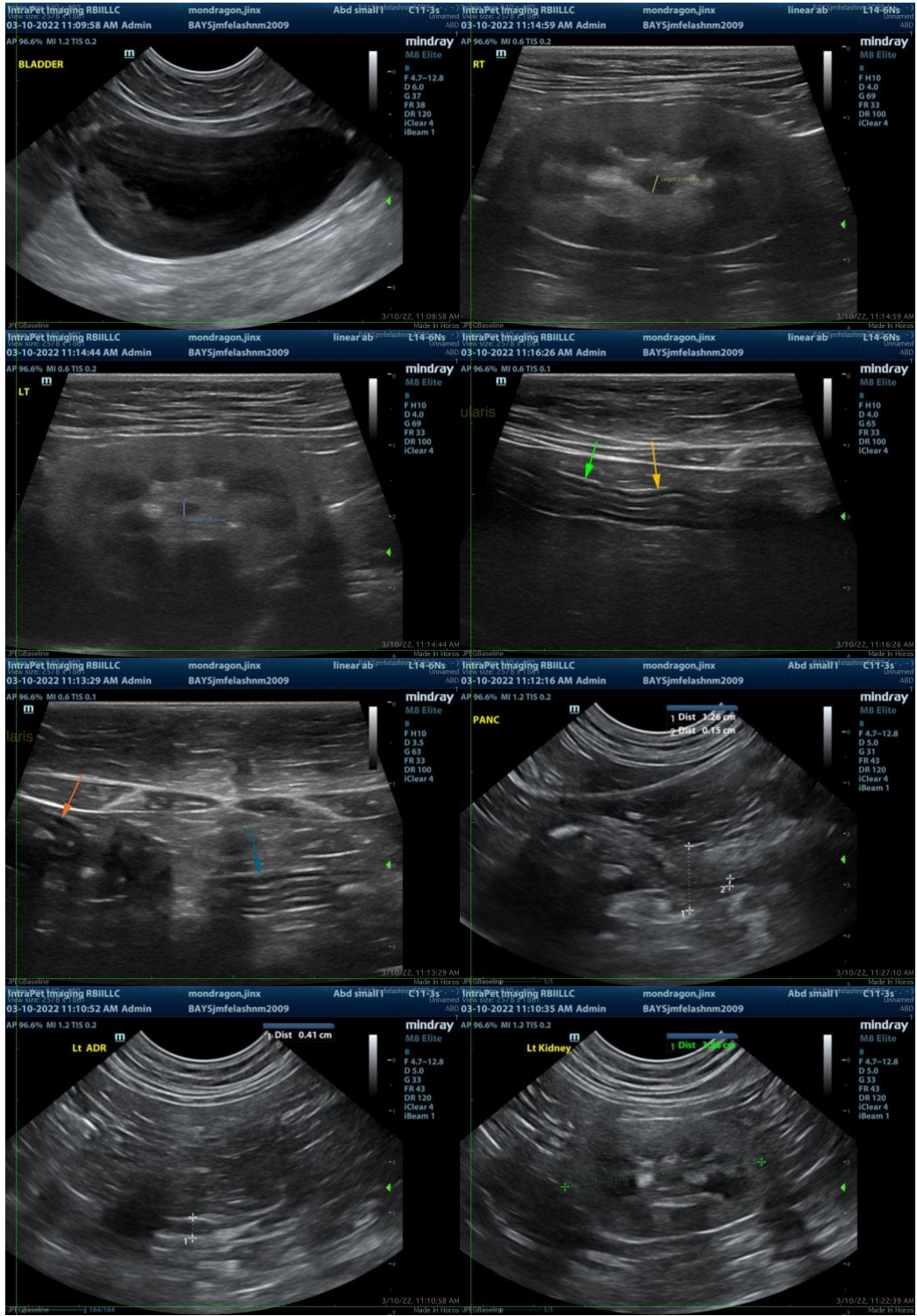
Primary Findings

- Age-related kidneys. This finding is expected/consistent with age-related mild degenerative disease and should be interpreted clinically in combination with laboratory changes. Very mild renal pelvis dilation was present/pyelectasia.
- Age-related pancreatic remodeling

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given this patient's urinary signs, urinary bladder debris and very mild pyelectasia, a urine culture is recommended to rule out an occult urinary tract infection. A free T4 could be considered, given that the reported total T4 is in the upper half of the normal reference range, as could a gastrointestinal malabsorption panel, including TLI, PLI, cobalamin and folate (to Texas A & M GI Laboratory) for further assessment of gastrointestinal function, given the very mild muscularis thickening.

In the meantime, medical management of constipation with adequate hydration, diet transition to a fiber response or colitis diet and lactulose, if necessary, could be considered.





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.

Beth Johnson, DVM DACVIM
Beth.Johnson@SonoPath.com