



PATIENT

Casey McGill

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

7 years

WEIGHT

14.9 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Marco Lichfield

HOSPITAL NAME

Sova

REFERRING VET

Dr. Sova

INVOICE

43059

DATE

3/1/23

PRESENTING CLINICAL SIGNS

History: Pet has a history of urinary blockage and hematuria and owner noticed straining and some lethargy, along with decreased appetite Yesterday and Today.
Abnormal PE/Chem/CBC/UA Results: pending UA results.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented multiple calculi and minor bladder wall thickening. Grouping of calculi measured approximately 1.5 cm. Sand was also noted in the bladder.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 4.14 cm. The right kidney measured 3.93 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 1.55 x 0.56 cm at the caudal pole and 0.51 cm at the cranial pole. The right adrenal gland measured 1.69 x 0.62 cm at the cranial pole and 0.55 cm at the caudal pole.

ULTRASONOGRAPHIC FINDINGS

Bladder calculi and sand. Minor bladder thickening.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cystotomy, sand/stone analysis along with a culture is indicated with a bladder wall biopsy to assess inflammatory cell type. There was no evidence of neoplasia. The bladder wall biopsy is important in case clinical signs persist despite liberation of calculi as underlying mural disease may be an issue.



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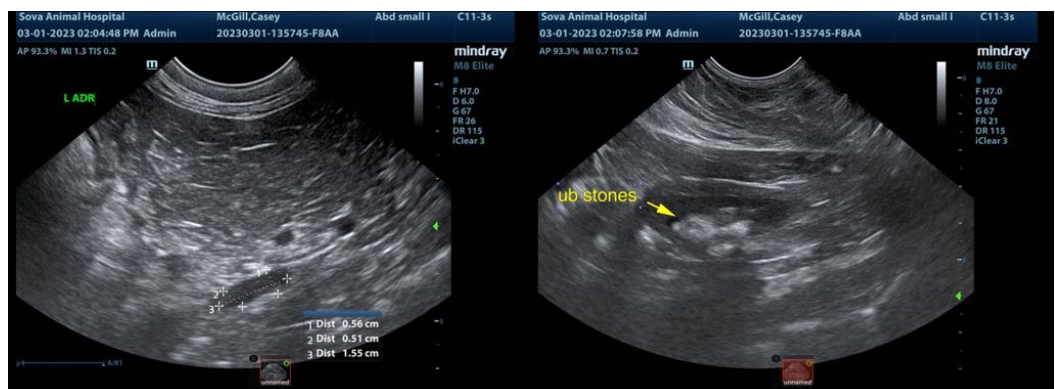
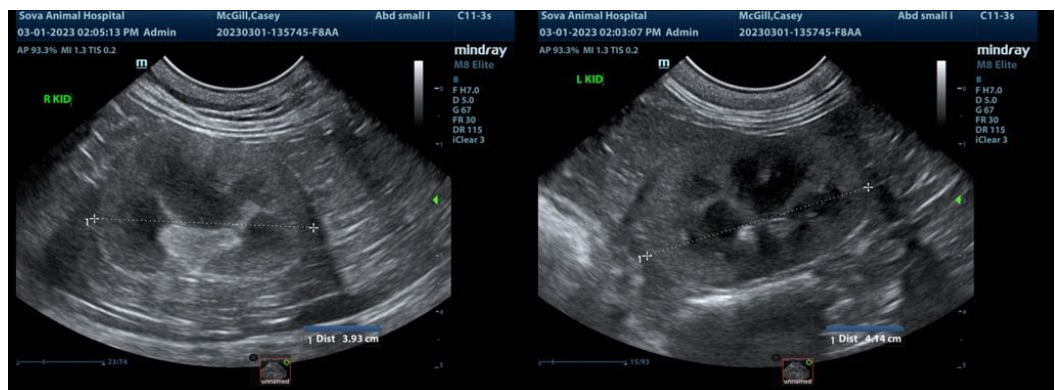
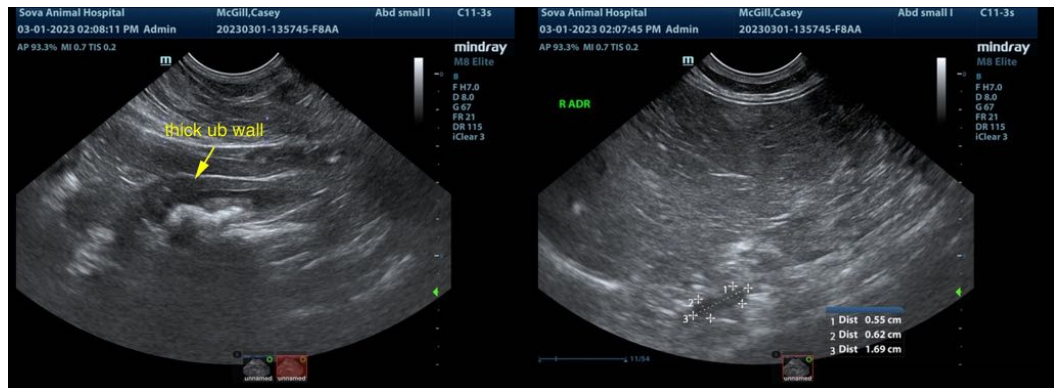
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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