



## PATIENT

Squeaker Stokes

## SPECIES

Feline

## BREED

DSH

## SEX

Neutered Male

## AGE

4 Years

## WEIGHT

5.8 kg

## INTERPRETED BY

Greg Kuhlman, DVM,  
DACVIM (SAIM)

## IMAGING PERFORMED BY

Dr. Gira

## HOSPITAL NAME

Healing Traditions  
Holistic VC

## REFERRING VET

Dr. Vockeroth

## INVOICE

75124

## DATE

5/13/26

## PRESENTING CLINICAL SIGNS

Very recent history of pollakiuria. Urinalysis taken by cysto on May 1 showed only RBC and 2+ protein. Put on Maropitant and Buprenorphine and Squeaker appears more comfortable and having larger urine balls over the weekend. Probable Feline Idiopathic Cystitis. Please focus ultrasound on urinary tract to rule out other issues.

In April 2025 was diagnosed with struvite crystalluria after pollakiuria symptoms occurred, but 2-3 urine tests during the year revealed no further crystals.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder contains minimal urine. The bladder wall is diffusely thickened with sections measuring up to 7.0 mm in width. The luminal margin of the bladder is irregular in shape. There is an image that shows a hyperechoic suspect urolith adhered to the luminal margin of the cranial bladder wall.

The right kidney presents normal size (4.1 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. A mild to moderate hyperechoic band parallel to the corticomedullary border is present.

The left kidney presents normal size (4.0 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. A mild hyperechoic band parallel to the corticomedullary border is present.

### *Adrenal Glands*

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The right adrenal gland measures 3.0 mm in width.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The left adrenal gland measures 3.7 mm in width.

### *Spleen*

The spleen is normal in size, shape, margination and echogenicity. No masses are seen.

### *Liver*

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern.

The gallbladder presents normal size with anechoic contents. Normal gallbladder wall. No evidence of bile duct distention or obstruction.

### *Gastrointestinal*

The stomach and intestines have normal wall layering and thickness. The ileum is normal in thickness and layering. Colon contains normal contents with normal wall thickness.



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## Pancreas

The visible pancreas appears normal.

## Free Abdomen

A prominent medial iliac lymph node is noted measuring 4.4 mm in width.

Prominent mesenteric lymph nodes were present. A representative node measures 3.6 mm in width x 11.5 mm in length.

No free abdominal fluid is seen.

## ULTRASONOGRAPHIC FINDINGS

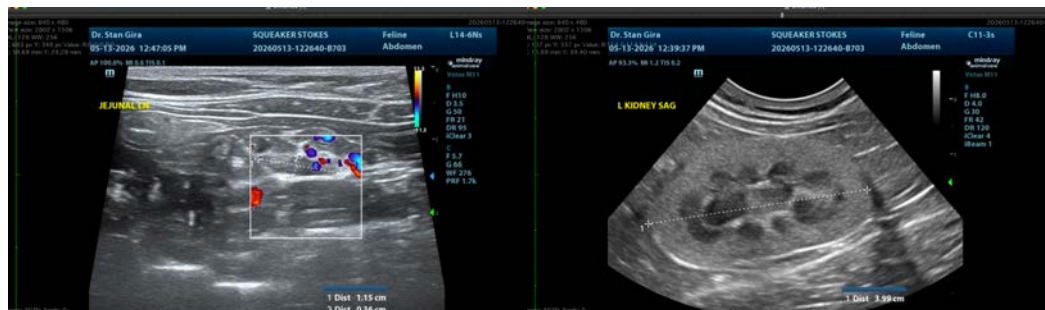
- Thickened urinary bladder wall with minimal urine and a suspect urolith.
- Medullary rim sign in both kidneys.
- Prominent medial iliac and mesenteric lymph nodes.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The medullary rim sign seen with both kidneys may be clinically incidental or may indicate a process such as pyelonephritis, less likely a toxin exposure. Suspect most likely benign etiology in this case, given the patient's clinical history.

The appearance of the urinary bladder is most likely due to chronic cystitis, either bacterial or due to chronic crystalluria. Recommend submitting urine culture to rule out an occult urinary tract infection. If urinary tract infection is ruled out, then continue to treat patient for idiopathic cystitis. If the patient is not eating a strict urinary diet, recommend a strict urinary diet such as Royal Canin SO or Hills CD. The appearance of the urinary bladder is not consistent with a neoplastic process.

The prominent lymph nodes appear normal or possibly reactive, unlikely to be prominent due to neoplasia. In this patient's situation, if lymph nodes are reactive, they are most likely reacting to the patient's lower urinary tract disease.





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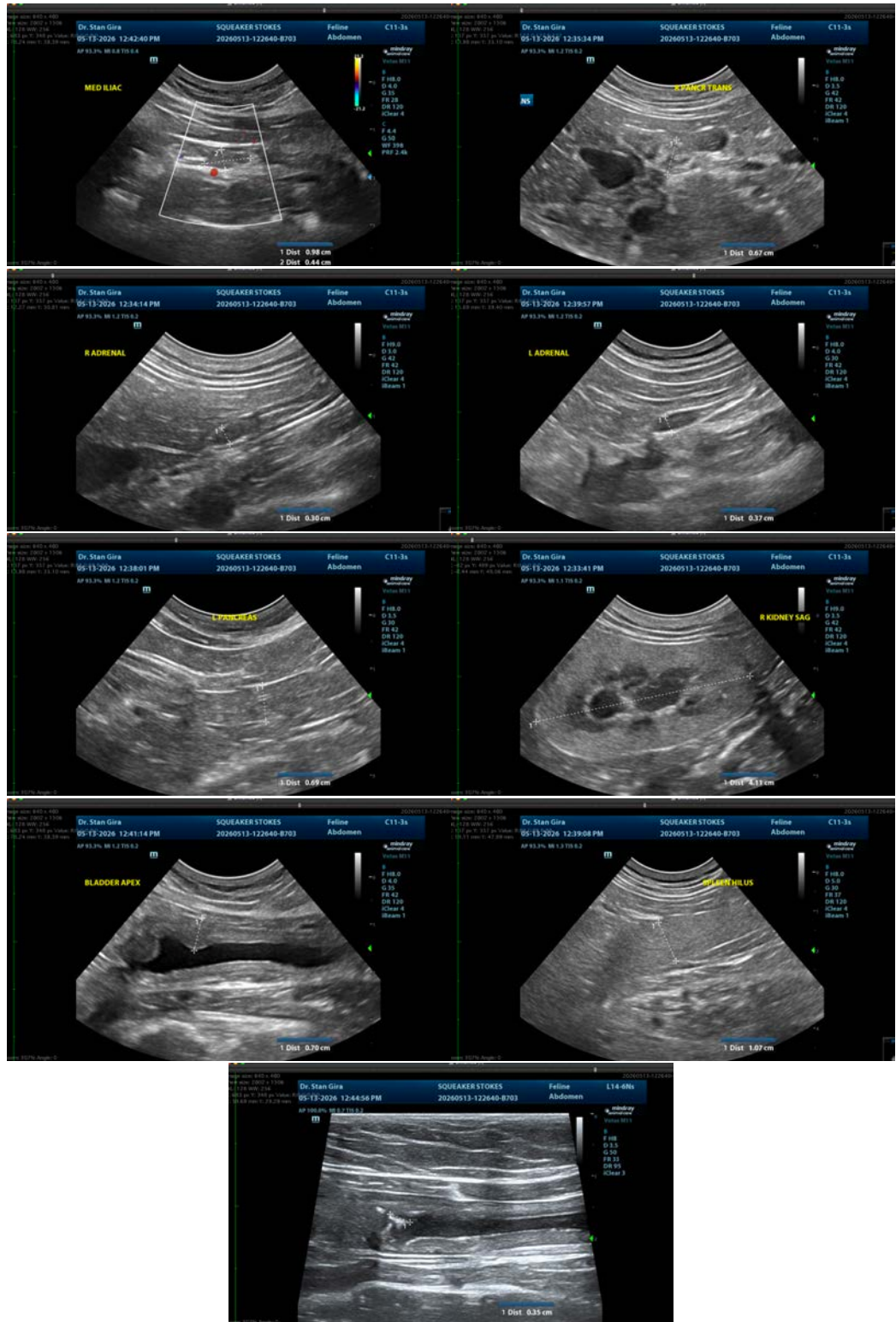
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Greg Kuhlman, DVM, DACVIM (SAIM)

Veterinary Internal Medicine Specialist  
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