

PATIENT

Georgie Harley

SPECIES

Feline

BREED

DLH

SEX

Female Spayed

AGE

5 years

WEIGHT

10 lbs

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Arculli

INVOICE

12702

DATE

4.7.23

PRESENTING CLINICAL SIGNS

History: Hematuria persisting after 1 wk of clavamox. Stranguria and pollakiuria resolved. Just finished clavamox.

Abnormal PE/Chem/CBC/UA Results: 3+ blood, > 50RBC, 3+ pro, 4-10 struvite, USG 1.062

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder mucosa measures thick (4.60 cm circumferentially). However, the bladder is relatively empty. The bladder lumen contains a very small volume of mostly anechoic urine, although there is a strongly shadowing calculus (0.37 cm in width / 0.83 cm in length).

The left kidney is normal in size, shape and architecture with smooth peripheral margins and measures 0.35 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 0.40 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is normal in size at 0.31 cm. The right adrenal gland has normal shape and is normal in appearance and echogenicity.

The right adrenal gland is normal in size at 0.21 cm. The right adrenal gland has normal shape and is normal in appearance and echogenicity.

Spleen

The splenic echotexture is mildly mottled with parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule is undulating and a bit bulged at the hilus. The splenic vasculature is normal without signs of congestion or thrombosis.

Liver

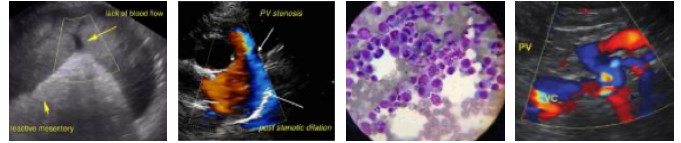
The liver is subjectively normal in size with normal contours, structure, with smooth peripheral margins. The echogenicity appears normal with normal portal markings. No overt evidence of inflammatory, infiltrative or regenerative pathology is evident. The visible portions of the vasculature and biliary tract appear normal. No pathological hepatic lymphadenopathy observed.

The gallbladder lumen is moderately distended. The wall is a normal thickness and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not visible.

Gastrointestinal Tract

The gastric lumen contains a small volume of fluid in the pylorus. The stomach wall is of normal wall thickness (0.25 cm) with some variability due to rugal folds. There is normal gastric wall layering. There are no masses or focal lesions observed and the pyloric outflow tract appears normal.

The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The duodenum is normal with distinct wall layering. The remainder of the small intestines are normal with normal wall layering. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. No focal lesions observed.



PATIENT

Georgie Harley

The ileocolic junction was visualized and had normal intact wall layering and is subjectively or normal thickness.

The sections of colon are visualized with formed fecal material and gas shadowing distally.

SPECIES

Feline

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

BREED

DLH

Peritoneum

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The omentum is of normal uniform echogenicity.

SEX

Female Spayed

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bladder calculus

AGE

5 years

Secondary Findings

- Mottled spleen with undulating margin

WEIGHT

10 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a single smooth bladder calculus that is likely too large to pass, given its length (Although radiographs would be more accurate for measurements). Consider a longer course of antibiotics and a lower urinary tract diet for 6-8 weeks to attempt dissolution for struvite stones. Otherwise cystotomy may be needed to remove other stone types.

The appearance of the spleen would be consistent with reactive spleen, such as lymphoid hyperplasia or extramedullary hematopoiesis.

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

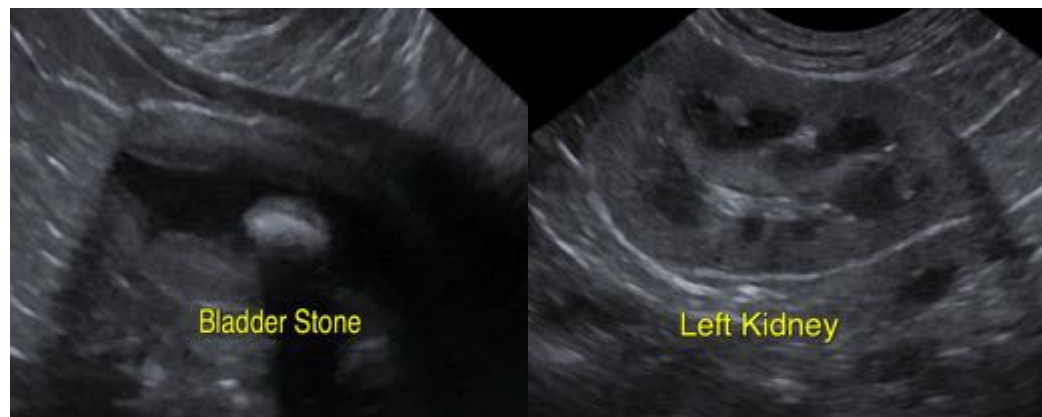
Arculli

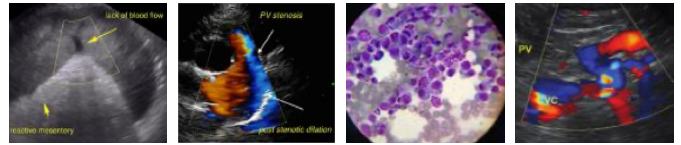
INVOICE

12702

DATE

4.7.23





PATIENT

Georgie Harley

SPECIES

Feline

BREED

DLH

SEX

Female Spayed

AGE

5 years

WEIGHT

10 lbs

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

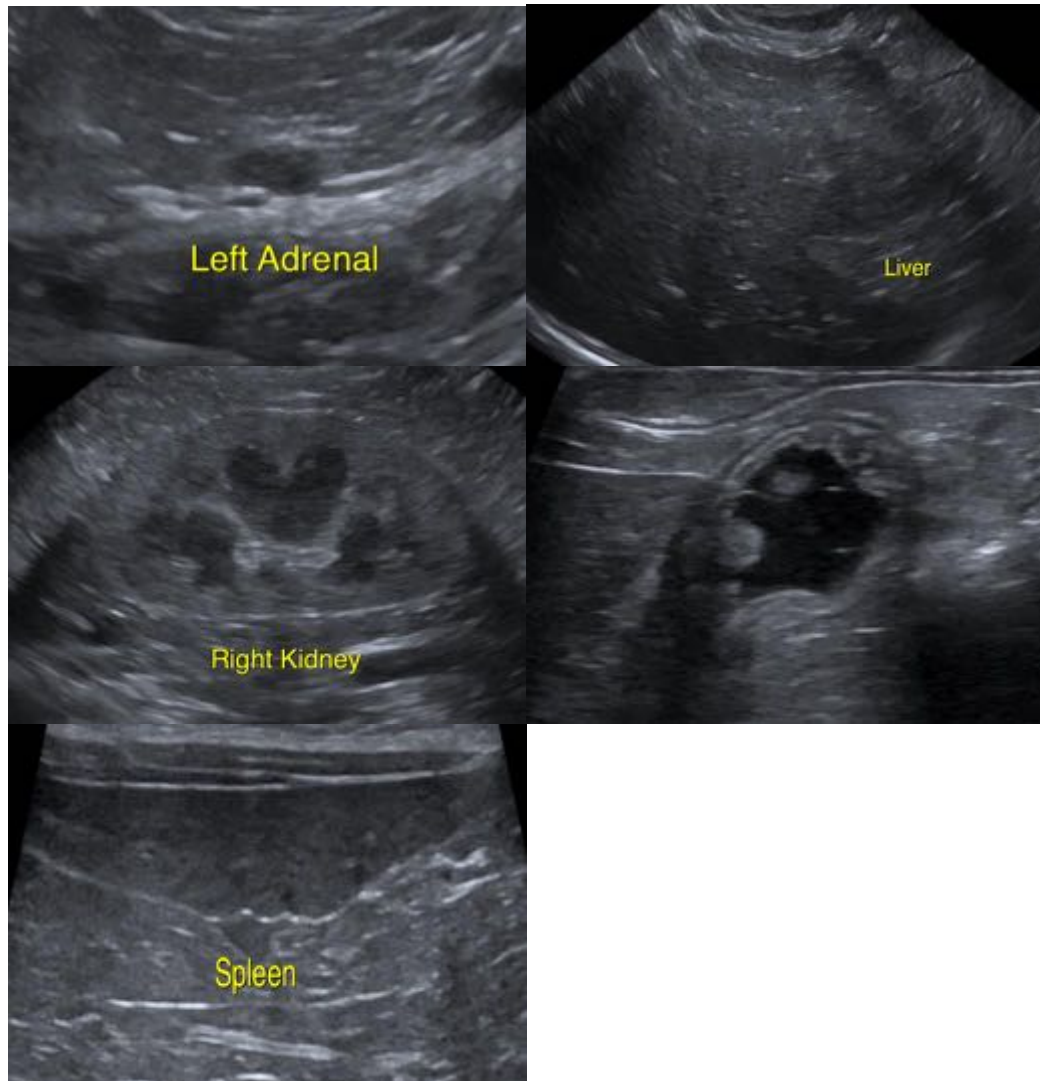
Arculli

INVOICE

12702

DATE

4.7.23



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.

Jessica Midence, DVM, DACVIM (SAIM)
info@SonoPath.com