



PATIENT

Pickles Cafourek

PRESENTING CLINICAL SIGNS

Signs of progressive kidney disease; BUN and creatinine increased from March. Mild anemia/RBC decrease (stable compared to March) Suspect bladder tumor

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

DSH

The urinary bladder is mildly distended with anechoic urine. The Bladder wall appears diffusely thickened, but there is a focal area of more extreme thickening along the dependent portion measuring 0.82 cm in thickness and 1.63 cm in length. Findings are suggestive of a bladder mass, but focal dependent cystitis cannot be excluded as a possibility. The lack of urine distention further hinders evaluation. There is no evidence of bladder calculi and the urethra appears normal.

SEX

Spayed Female

The left kidney has a normal shape and size (3.4 cm) with severe pyelectasia of 0.88 cm. Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE

15 Years 8 Months

The right kidney has a normal shape and size (3.5 cm) with severe pyelectasia of 1.1 cm. Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

8.5 Pounds

Adrenal Glands

The region of left adrenal (Cranial to left renal artery) is unremarkable but the adrenal is not distinctly visualized. No evidence of a mass effect.

The region of the right adrenal (between right cranial kidney and vena cava) is unremarkable, but the adrenal is not distinctly visualized. No evidence of a mass effect.

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.36cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Dr. Jacquie Preston

HOSPITAL NAME

All Creatures AH

REFERRING VET

Dr. Jacquie Preston

INVOICE

26540

DATE

10/20/21



PATIENT

Pickles Cafourek

layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (between 0.13-0.38cm in wall thickness) and the jejunum measured as normal (between 0.15-0.36cm.) Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

SPECIES

Feline

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

BREED

DSH

Pancreas

The pancreas is prominent, nodular and hypoechoic as compared to the surrounding isoechoic mesentery. Prominent pancreatic duct noted. There is no evidence of regional mesenteric inflammation or fluid.

SEX

Spayed Female

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

AGE

15 Years 8 Months

ULTRASONOGRAPHIC FINDINGS

WEIGHT

8.5 Pounds

- Decreased corticomedullary distinction in both kidneys with severe bilateral pyelectasia – Pyelectasia of the left/right kidney could be consistent with pyelonephritis, chronic renal disease, secondary to PU/PD or fluid therapy (if applicable), other. Mild loss of corticomedullary distinction in both kidneys could be consistent with chronic degenerative disease or interstitial nephrosis.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

- Hypoechoic prominent pancreas with dilated duct and nodular parenchyma – The pancreatic changes are most consistent with mild pancreatitis or a recent episode of pancreatic inflammation. The nodules observed could be consistent with benign or cancerous nodules (benign is favored).

IMAGING PERFORMED BY

Dr. Jacquie Preston

- Diffusely thickened urinary bladder with focal dependent wall thickening – could be consistent with a bladder mass or severe cystitis. Recommend urinalysis and culture and reevaluation if the bladder can be visualized with more intraluminal urine. Consider cytology on urinalysis sample.

HOSPITAL NAME

All Creatures AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bladder wall is very thickened and irregular, and both kidneys have evidence of severe pyelectasia. These findings would be most consistent either with severe cystitis and pyelonephritis or could be consistent with bladder neoplasia and obstructive change. Recommend urinalysis and culture. Recommend submission of urinalysis for cytology to look for evidence of cancerous cells. If urine culture is negative, options moving forward would include:

REFERRING VET

Dr. Jacquie Preston

- Traumatic catheterization with cytology
- Fine needle aspirate of the nodule, however if this is neoplasia, neoplastic cells can be tracked along the needle line.
- Surgery and biopsy of the urinary bladder with culture of the wall.

INVOICE

26540

DATE

10/20/21

Additionally, pancreatic changes are present. This could be consistent with active disease or nodular change/previous scarring. Consider GI panel with a quantitative fPLI, TLI cobalamin and folate to obtain more information regarding the pancreas. Recommend 3-view thoracic radiographs.



PATIENT

Pickles Cafourek

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

15 Years 8 Months

WEIGHT

8.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Dr. Jacquie Preston

HOSPITAL NAME

All Creatures AH

REFERRING VET

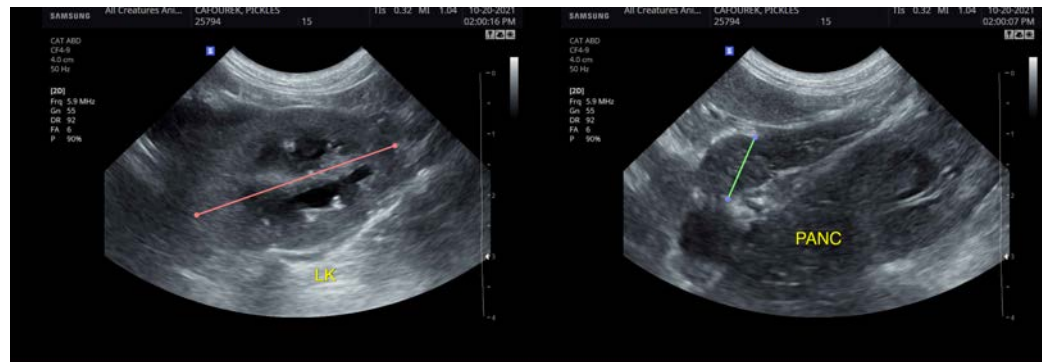
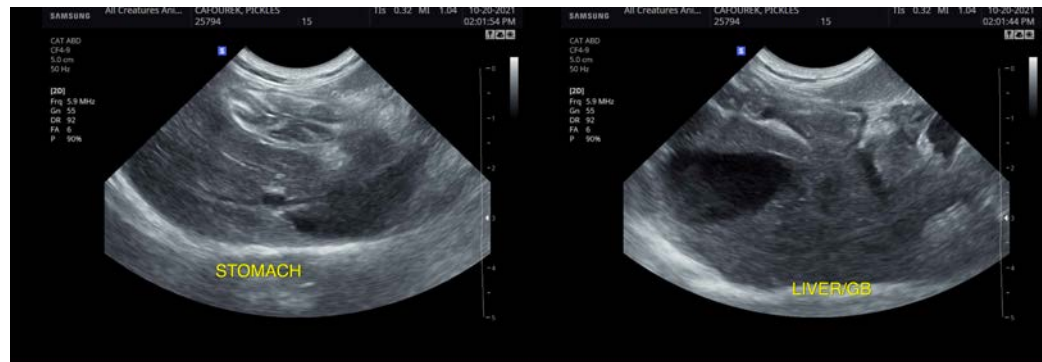
Dr. Jacquie Preston

INVOICE

26540

DATE

10/20/21





PATIENT

Pickles Cafourek

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.

SPECIES

Feline

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.

BREED

DSH

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)
kathleen.sennello@sonopath.com

SEX

Spayed Female

AGE

15 Years 8 Months

WEIGHT

8.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Dr. Jacquie Preston

HOSPITAL NAME

All Creatures AH

REFERRING VET

Dr. Jacquie Preston

INVOICE

26540

DATE

10/20/21