



PATIENT PRESENTING CLINICAL SIGNS

Titan Paws & Tails
Rescue

History: High stress, living in a multi cat foster home. Left blood spots on couch under where he was laying when he got up. Thought to be urine. Convenia was given two weeks ago with no real improvement. Cannot pill this boy.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DMH

Urinary System

The urinary bladder is moderately distended with anechoic urine. There is a focal hyperechoic shadowing structure visualized within the urinary bladder, most consistent with a stone, measuring 1.17 cm x 0.59 cm.

SEX

Neutered Male

The left kidney has a normal shape and size (3.8 cm). Overall echogenicity is normal with adequate 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 hydronephrosis. Renal vasculature is normal.

AGE

4 Years

The right kidney has a normal shape and size (4.05 cm). Overall echogenicity is normal with adequate 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 hydronephrosis. Renal vasculature is normal.

WEIGHT

5.5 kg

Adrenal Glands

The left adrenal gland is normal in size measuring 0.3 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.36 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

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Spleen

The spleen is subjectively normal in size (0.7 cm in width at the level of the hilus), 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.

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

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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.

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Gastrointestinal

The stomach contains moderate fluid. It measures at a normal thickness of <0.36 cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and

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there is no impression of reduced peristaltic activity. There is an image submitted of a hypoechoic tissue density structure, measuring approximately 1.13 cm, which possibly is visualized within the gastric lumen. This could also be some nonshadowing ingesta, etc.

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

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.

Pancreas

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.

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is no significant evidence of lymphadenopathy, but there is a visible/slightly prominent lymph node near the ileocecal junction, measuring 0.41 cm.

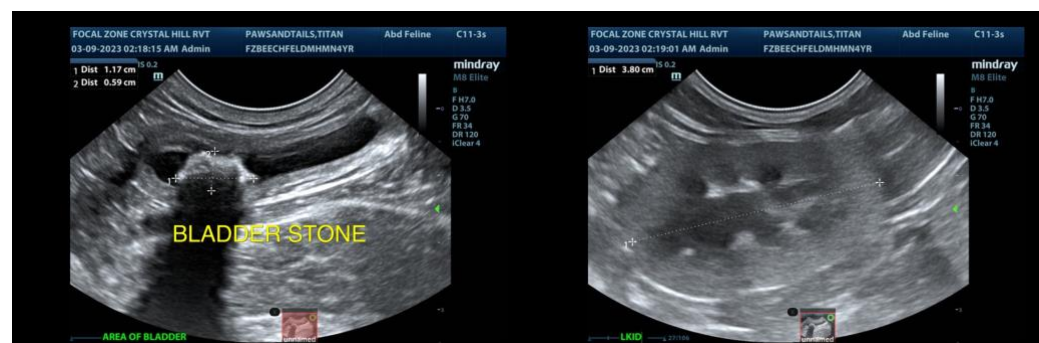
ULTRASONOGRAPHIC FINDINGS

- Hyperechoic shadowing structure visualized within the urinary bladder. Findings are most consistent with a bladder stone. Correlate with abdominal radiographs, urinalysis and culture.
- Questionable soft tissue structure visualized within the gastric lumen. The significance of this is unclear. Consider reevaluation in 2-3 months or if signs of underlying GI disease develop.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a focal bladder stone visualized within the urinary bladder. This is the likely source of the hematuria reported. Recommend a urinalysis, culture and confirm the size and number of stones present with abdominal radiographs. A cystotomy would likely be necessary to further evaluate.

There is a questionable nonshadowing structure visualized within the gastric lumen. This could represent a small mass effect, a prominent rugal fold, ingesta, etc. Consider reevaluation in the future.





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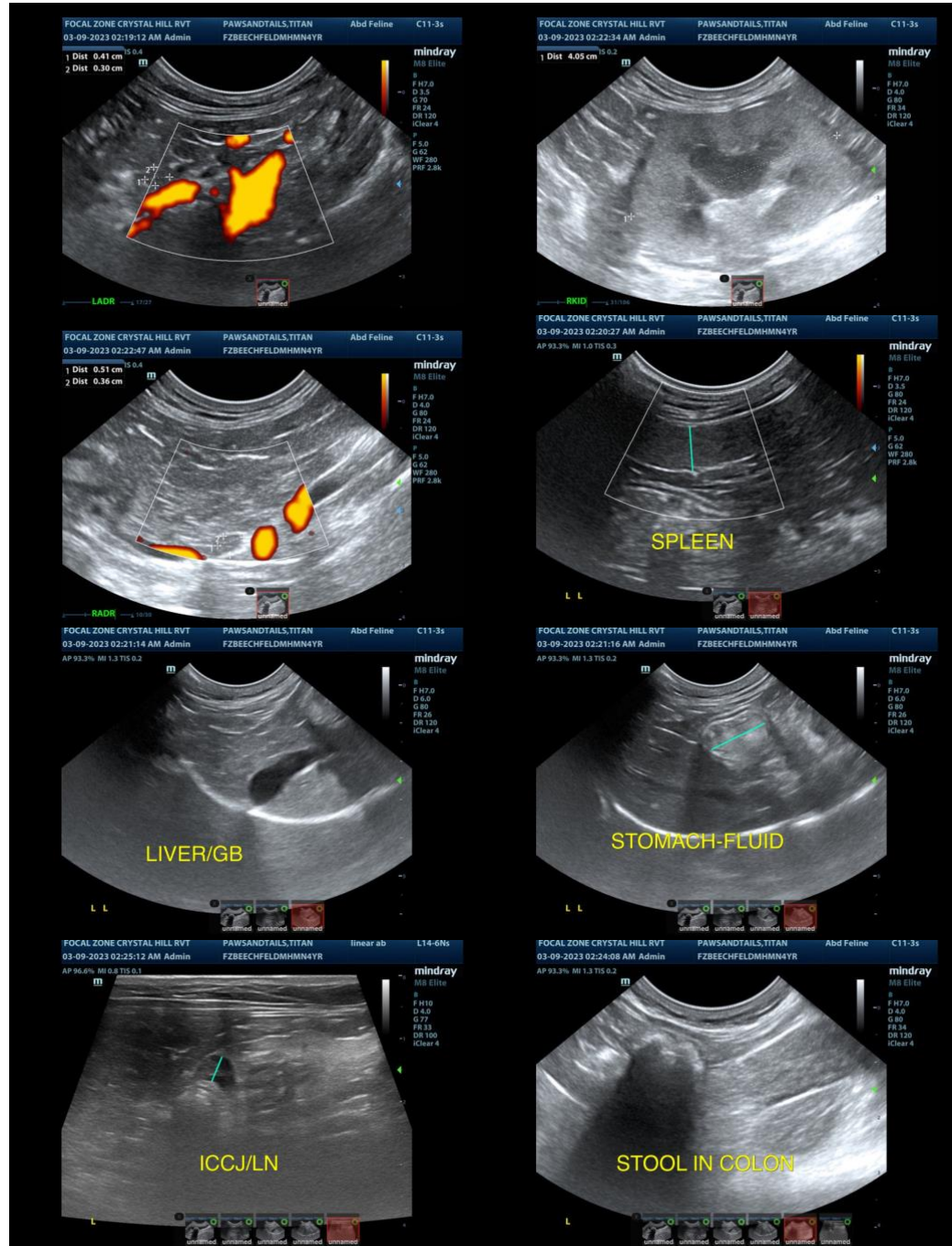
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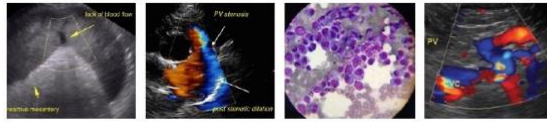
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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