



PATIENT

Willow Lang

PRESENTING CLINICAL SIGNS

History: Thickened bladder wall, history of possible UTIs, urinating outside of the litter box, hematuria.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** is well distended. Presence of a moderate amount of gravity dependent and free-floating sediment that causes acoustic shadowing. Some of which "scintillates". The sediment has collected along the ventral wall, particularly at the junction of the ventral wall and region of the trigone. This same area of the wall is very mildly irregular. The remainder of the bladder wall is smooth and regular. A few mineralizations (no acoustic shadows) are visualized within the proximal 3 to 4 centimeters of the urethra. There is no evidence of an obstruction, polyps or a mass.

BREED

DSH

SEX

Spayed Female

Uterine stump

A prominent, mildly heterogeneous, structure measuring approximately 2 cm in length and 0.5 cm in width is observed dorsal to the urethra. In a different view it is apparent that it is more elongated and extends from the region of the cysto-vesicular junction (CVJ) along the urethra. The structure is consistent with a uterine stump. A heterogeneous, primarily anechoic lesion is noted within the uterine stump. It measures 6.2 mm in diameter x 7.1 mm in length. It is most consistent with a cystic lesion, however, nodular hyperplasia cannot be excluded.

AGE

5 Years

WEIGHT

N/A

Kidneys

Both kidneys are mildly decreased in size.

The **left kidney** measures 3.63 cm (3.80-4.40 cm). The capsule is very mildly irregular at the anti-mesenteric border. Its overall architecture, including the definition of the cortico-medullary junction, is preserved. There are no signs of nephroliths or pyelectasia. Blood flow is very good and is possibly increased (see below). An accumulation of fat is observed at the pelvis. The walls of the arcuate arteries are hyperechoic, which may be due to inflammation, fat, fibrosis and/or mineralization. The surrounding mesentery is moderate to markedly hyperechoic.

INTERPRETED BY

Lisa Carioto, DVM,
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ACVIM

The **right kidney** measures 3.68 cm (3.80-4.40 cm). Findings are similar to the left.

IMAGING PERFORMED BY

Kelly Vazquez

Aortic bifurcation/trifurcation

No abnormalities observed.

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Westwood Regional
VH

Adrenal Glands

The **left adrenal gland** measures 0.35 cm in diameter. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

REFERRING VET

Dr. Goldman

The **right adrenal gland** measures 0.40 cm in diameter. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

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Spleen

The spleen is within normal limits in size 8.4 mm (normal = 10 mm), echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

DATE

6/1/22



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Liver

Willow Lang

There are no obvious signs of hepatomegaly and its borders are smooth and sharp. A diffuse, very mildly coarse/granular echotexture is observed. No obvious abnormalities are noted with the hepatic vessels. There is no evidence of a portosystemic shunt.

SPECIES

Feline

The gallbladder wall is within normal limits in thickness and echogenicity. There is no evidence of echogenic material within the GB or edema surrounding it. The portions of the cystic and/or common bile ducts observed are not dilated or tortuous, i.e. there are no signs of an obstruction.

BREED

Gastrointestinal

DSH

The gastric wall is within normal limits in thickness and the wall layers are well defined. No obvious abnormalities are observed with its peristalsis.

SEX

Spayed Female

The small intestinal wall thickness, including the duodenum, is within normal limits and the definition of the wall layers is preserved. Abnormally dilated loops of bowel are not observed.

Gas is present in the transverse colon.

AGE

5 Years

The colonic wall is not thickened and mural detail is considered normal. Formed stools present within colon.

There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction in the gastrointestinal tract.

WEIGHT

N/A

Pancreas

The pancreas is mildly, but diffusely hypoechoic. Its contours are smooth and regular. The mesentery surrounding the pancreas and kidneys is severely hyperechoic. These findings are suggestive of active pancreatitis. Pinpoint to punctate hyperechoic foci are scattered throughout the parenchyma. These changes may be an age-related change, fibrosis due to previous episodes of pancreatitis, mineralization and/or amyloid deposition. Overt signs of neoplasia are not noted.

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Other

IMAGING PERFORMED BY

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Lymph nodes

No abnormalities are observed

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VH

Abdominal effusion is not visualized.

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ULTRASONOGRAPHIC FINDINGS

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- **Urinary bladder:** Presence of cystolithiasis in the form of a large amount of sediment ("sand"), with signs of mild inflammation of the mucosa at the junction of the ventral wall and trigone. Mineralizations are also present within the urethra. Although not currently obstructed, their presence are a source of inflammation.
- **Kidneys:** Hypertension may be present, however, blood flow may also be normal for Willow. Pyelonephritis cannot be excluded based on the severe hyperechogenicity of the surrounding mesentery.
- **Uterine stump:** A prominent, mildly heterogeneous uterine stump. A cystic lesion or nodular hyperplasia is noted within the uterine stump. The heterogeneous appearance of the uterine stump may be due to remodeling.

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- **Pancreas:** A smoldering pancreatitis cannot be excluded.

Willow Lang

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The following are suggested/recommended

Feline

An in-house urinalysis to evaluate the type of crystals and pH to help determine if dissolution is possible.

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A CBC, serum biochemical profile, SDMA, spec fPL, if not already performed, particularly prior to general anesthesia.

SEX

Arterial blood pressure

Spayed Female

Urine culture and sensitivity

AGE

5 Years

Willow will most likely benefit from an “aggressive” flushing of the urinary bladder to remove the sediment and prevent development of large cystoliths. It would be worthwhile attempting the flush via catheterization, rather than performing a cystotomy as the initial procedure.

WEIGHT

N/A

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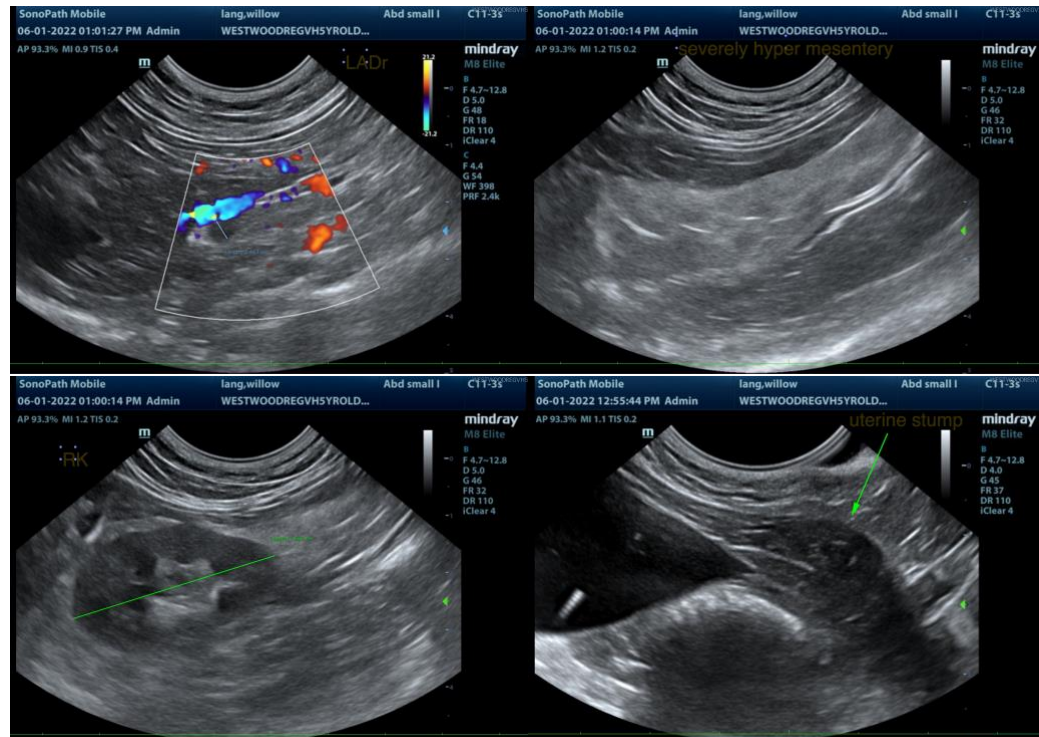
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SPECIES

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BREED

DSH

SEX

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AGE

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WEIGHT

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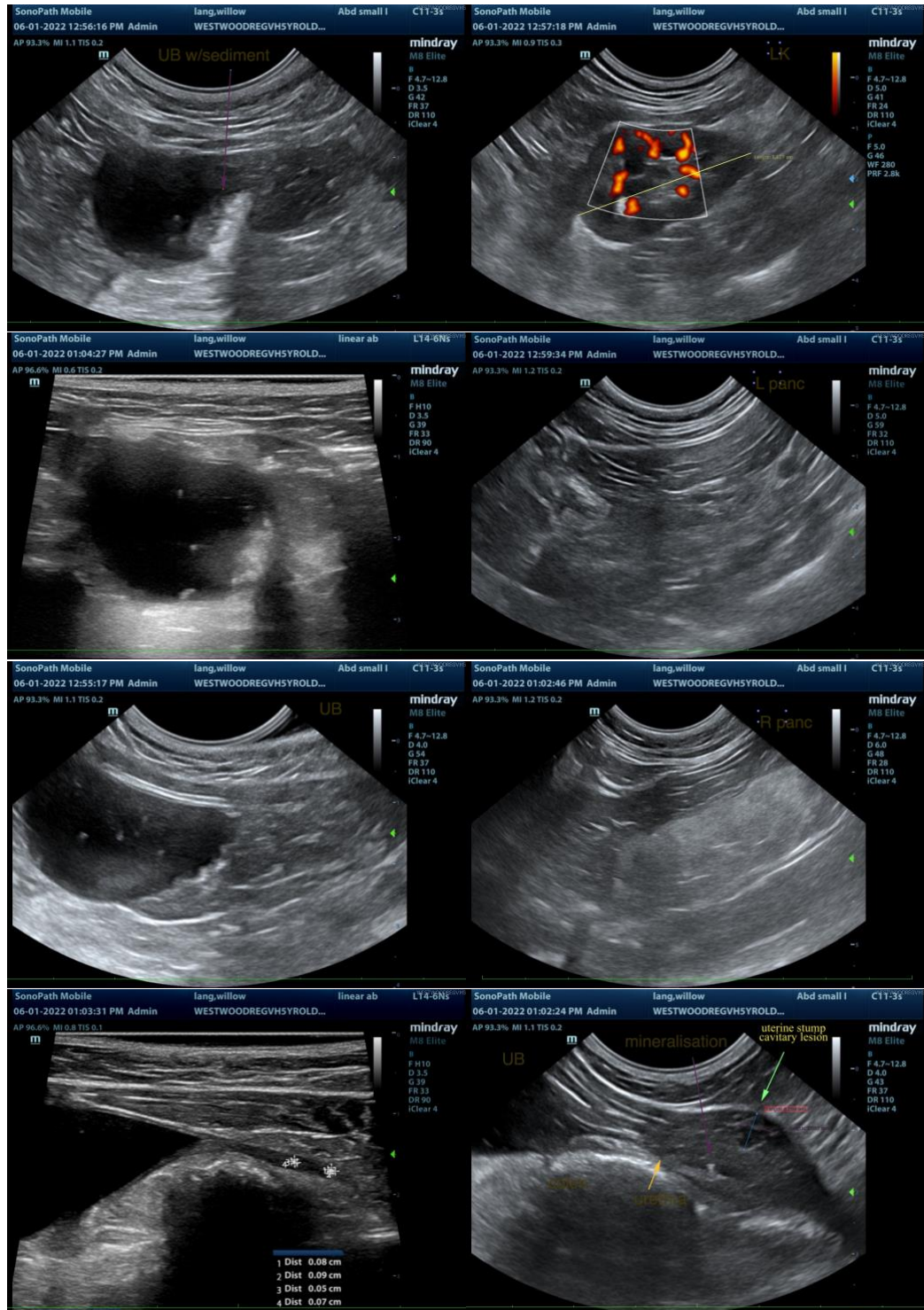
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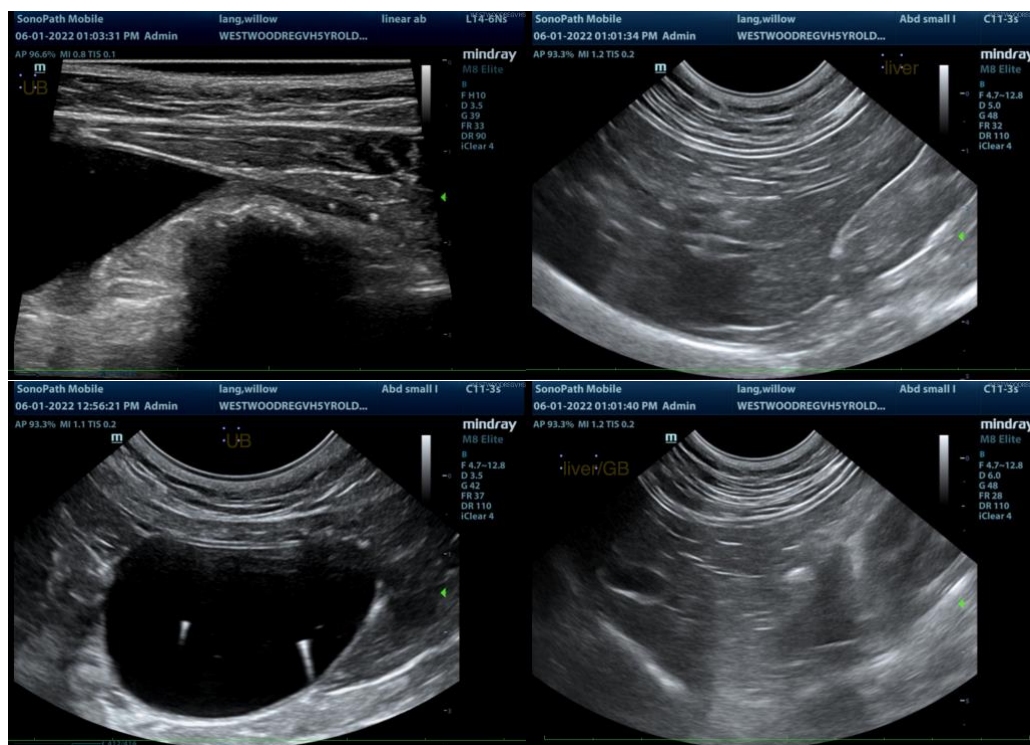
Spayed Female

AGE

5 Years

WEIGHT

N/A



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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