



**PATIENT**

Obi Sallis

**PRESENTING CLINICAL SIGNS**

History: Stranguria and hematuria. Patient under short term GA for scan

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: UA non diagnostic. Cysto taken at time of scan for Culture and sensitivity. No obvious blood seen on collection.

**BREED**

Siamese Mix

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. The ventral urinary bladder wall measured 0.1 cm in width. Anechoic urine was present in the lumen with very minor nondependent sediment which may indicate cellular debris/protein, crystalline debris, lipid or mucus. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**SEX**

MN

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. No evidence of renal calculi was present. The left kidney measured 3.1 cm in length. The right kidney measured 3.2 cm in length.

**AGE**

14mo

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

4kg

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.30 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.33 cm width.

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

**Spleen**

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.79 cm in width at the level of the hilus.

**IMAGING PERFORMED BY**

Dr. Belan

**Liver**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**HOSPITAL NAME**

Britannia Kingsland

**REFERRING VET**

Dr. Martinez

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

**INVOICE**

11365ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

**DATE**

08/15/2022

Normal visible colon wall layers were present with apparent formed feces in lumen.

**Pancreas**



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The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

**SPECIES**

Feline

**Free Abdomen**

No peritoneal effusion was present.

**BREED**

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Solitary to intermittent mildly prominent colic lymph nodes adjacent to the ileocolic junction were present, an example measuring 2.1 cm x 0.56 cm. These lymph nodes may indicate hyperplasia, minor reactive lymphadenitis or immunologic immaturity.

**SEX**

MN

- Sonographically unremarkable urinary bladder with mild particulate sediment
- Overtly normal bilateral kidneys
- Secondary finding-solitary to intermittent non-specific benign colic lymph nodes

**ULTRASONOGRAPHIC FINDINGS**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

14mo

Overall an obvious cause of the patient's stranguria and hematuria was nor definitively evident. Potential for minor idiopathic cystitis could be possible. Correlation with pending urine C/S is recommended. Pending C/S results, empirical therapy for mild idiopathic cystitis could be considered.

**WEIGHT**

4kg

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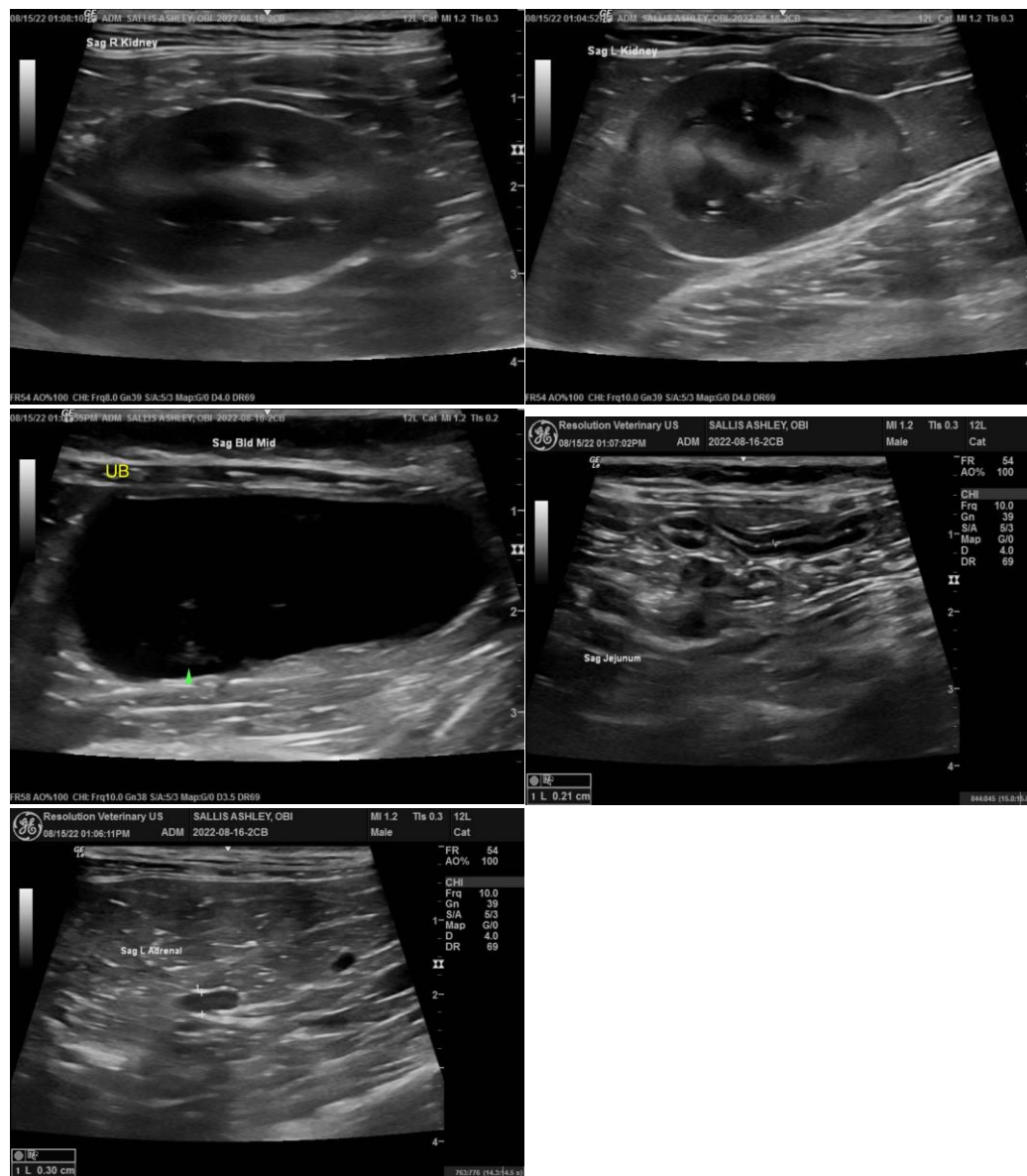
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com