

PATIENT

Zara Defreitas

SPECIES

Feline

BREED

Ragdoll

SEX

FS

AGE

8 years

WEIGHT

6.5 kg

PRESENTING CLINICAL SIGNS

Presented Aug 3 for discharge from vulva, inappropriate urination, stranguria. Urinalysis showed pyuria, hematuria, proteinuria, mild struvite crystalluria. Started on clavaseptin. Clinical signs resolved but then slight discharge from vulva recurred.

Abnormal PE/Chem/CBC/UA Results: Urinalysis - USG 1.052, 4+ proteinuria, pyuria, hematuria, pH 7.5, few struvites.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was subnormal in size owing to mild anechoic urine and without evidence of urinary bladder distention. The ventral apical urinary bladder wall measured 0.45 cm width. Normal urinary bladder mural echogenicity was noted with no evidence of mural mineralization. Mild anechoic urine was present in the urinary bladder with luminal mineral to small cholelith measuring 0.86 cm in diameter. Likely adhered areas of mineral along the ventroapical urinary bladder luminal surface were noted. No evidence of neoplastic criteria was noted. The urethra exhibited normal structure and tone to a depth of 2.0 cm.

No evidence of overt pathology was noted In the area of the uterine remnant, including no evidence of uterine stump, granuloma or pyometra.

The area of the aortic trifurcation was free of pathology.

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 pyelectasia. The left kidney measured 3.8 cm in length. The right kidney measured 4.0 cm in length.

Adrenal Glands

The bilateral adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.29 width and the right adrenal gland measured 0.30 width.

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 0.80 cm width at the level of the hilus.

Liver/ Gallbladder

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.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sarah Barthelemy

HOSPITAL NAME

Ramsay AC

REFERRING VET

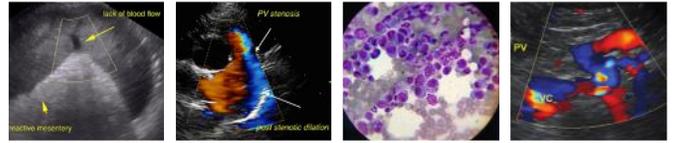
Dr. Patabendi

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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.

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.

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

Pancreas

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 were evident.

Free Abdomen

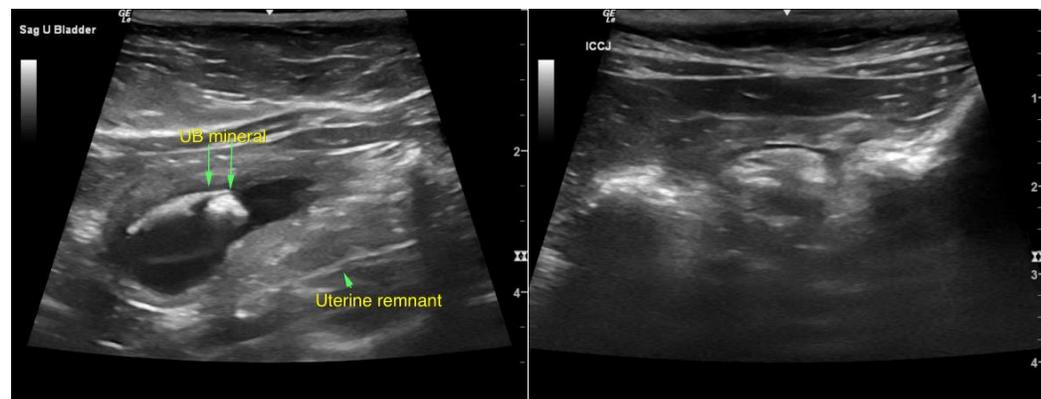
No overt lymphadenopathy or peritoneal effusion was present.

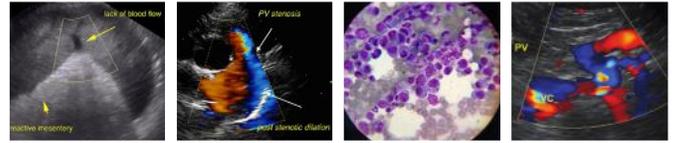
ULTRASONOGRAPHIC FINDINGS

- Urinary bladder calculus and adhered ventroapical urinary bladder luminal mineral, concurrent probable chronic cystitis
- Sonographically normal bilateral kidneys - no evidence of pyelonephritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine C/S on a sterile urine sample to assess for underlying infection is recommended. Urinary dietary therapy may prove beneficial with sonographic monitoring of the urinary bladder. Eventual cystotomy with urinary bladder flush, urinary bladder mural biopsies for histopathology, +/- tissue C/S if documented UTI, may eventually be indicated. No evidence of uterine remnant pathology was noted.





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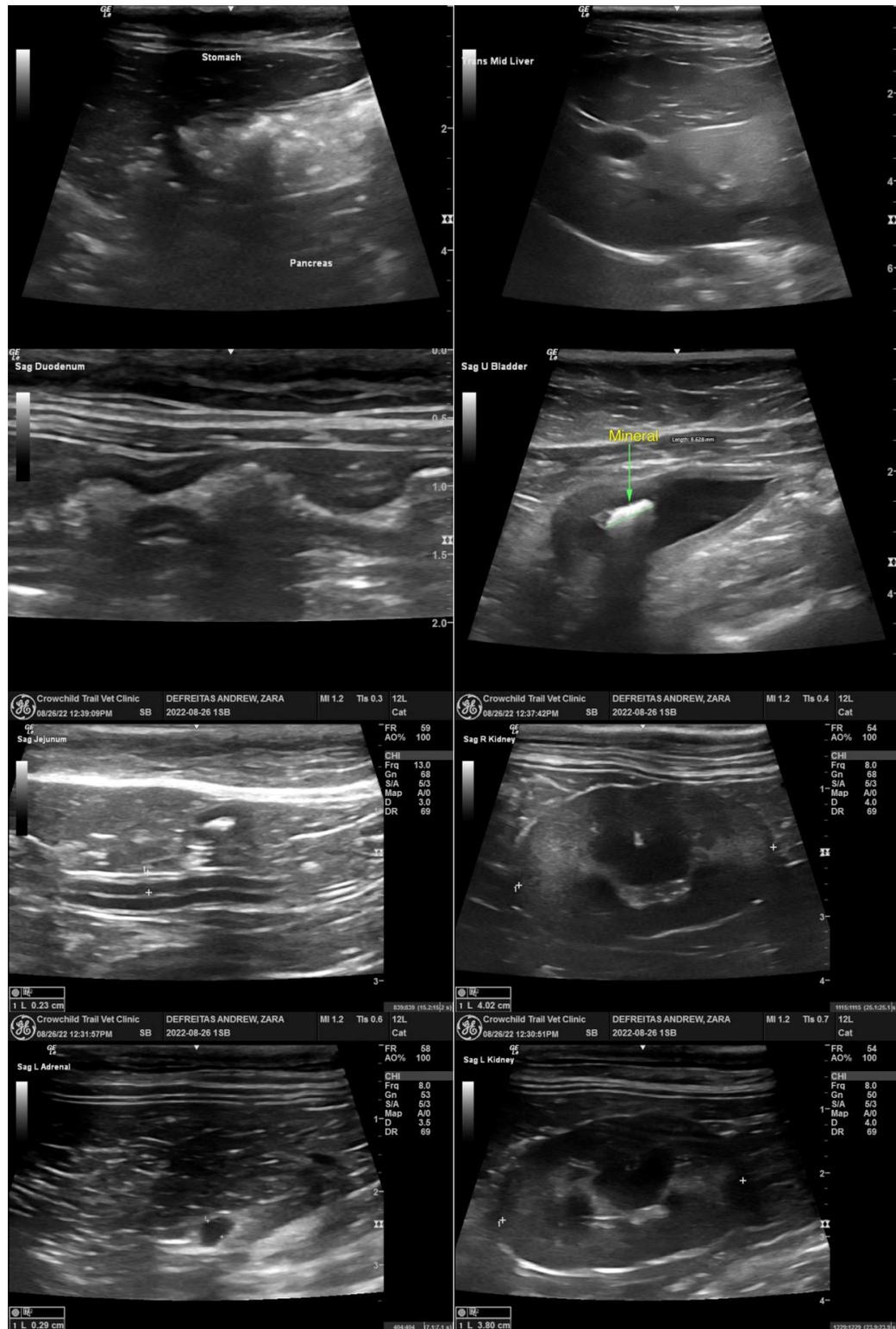
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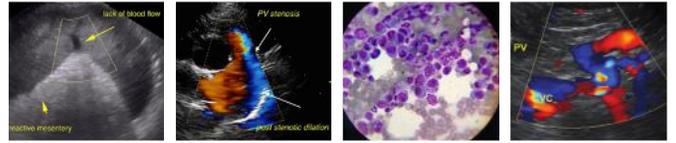
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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