



PATIENT

Scout De Looper

SPECIES

Feline

BREED

Feline

SEX

FN

AGE

2Y

WEIGHT

4.3

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Eamon

INVOICE

73840

DATE

2-18-26

PRESENTING CLINICAL SIGNS

- dysuria when sleeping
- wakes and cleans up wet patch

Abnormal PE/Chem/CBC/UA Results: urine culture neg, cbc/chem normal

COMPUTED TOMOGRAPHY OF THE ABDOMEN

A pre- and post-contrast CT study of the abdomen including the lumbar spine in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

The pre-renal segment of the caudal vena cava is located on the left sided.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted. The left ureter is crossing the caudal vena cava dorsally, level with L5/L6. The ureters are not dilated. The urinary bladder is mild to moderately distended by fluid attenuating material and presents a smooth and thin wall. Both ureters enter the bladder wall approximately level in the bladder neck – excreted contrast is only appreciated in the urinary bladder.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The osseous and soft tissue structures of the lumbar spine reveal no abnormalities. The dural tube has the expected diameter and attenuation behavior throughout.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Relative caudal position of the vesicoureteral junction
- Left sided caudal vena cava (pre-renal segment) as anatomical variant
- Left sided retrocaval ureter without mechanical obstruction
- Normal lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The caudal position of the vesicoureteral junction can be a predisposing entity for urinary incontinence – although no contrast is appreciated in the urethra.



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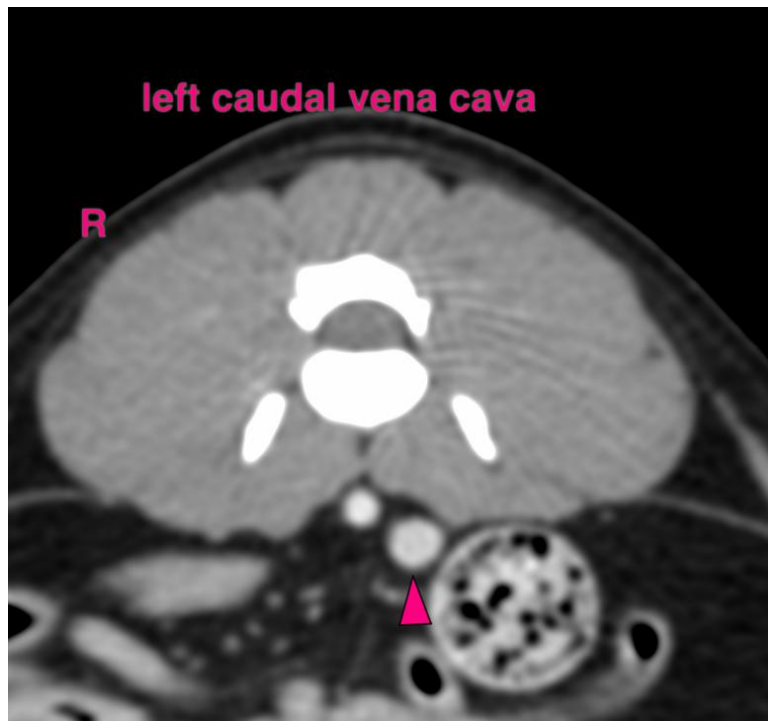
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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