



PATIENT PRESENTING CLINICAL SIGNS

Bodni Bonkowski

R/O significant renal failure/pyelonephritis vs neoplasia. Severe azotemia, mild non-regen anemia, mild hypercalcemia and hyperkalemia. On amlodipine, mirtazapine, renal diet
Abnormal PE/Chem/CBC/UA Results: WBC 38.2, RBC low 5.9, HGB decr 9, HCT decr 28%, neuts elevated 90%; lymphs, eos decr, monos incr; ALT 442, BUN 249, crea 20.9, phos 16.7, Ca 11.5, Na 159, KCL 6.2, amylase 6431

SPECIES

Feline

BREED

Domestic Shorthair

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

SEX

Neutered male

AGE

12 years

The **kidneys** were enlarged with thickened echogenic cortices and loss of corticomedullary definition and pelvic mineralization. The left kidney measured 5.45 cm. The right kidney measured 4.93 cm. Blood flow to the kidneys appeared to be mildly subnormal on Power Doppler assessment.

WEIGHT

9.5 lbs

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

IMAGING PERFORMED BY

Diane McFadden, RVT

HOSPITAL NAME

Animal Care Center of
Flanders

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A mixed, hypoechoic mass was noted with areas of cavitation measuring 1.5 cm. The mass occupied the area of the pancreas and appears to be deriving from the caudate process of the liver. The mass impinges upon and superimposes the right pancreatic limb. The remainder of the liver revealed increased portal markings, multi-focal nodules on the left medial liver as well. The gallbladder and common bile duct were unremarkable.

DATE

1/11/22

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

SPECIES

Feline

Pancreas

See liver.

BREED

Domestic Shorthair

ULTRASONOGRAPHIC FINDINGS

Moderately complex caudate liver mass with left medial liver nodules. Cystadenoma, carcinoma +/- abscessation are all possible.

SEX

Neutered male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

12 years

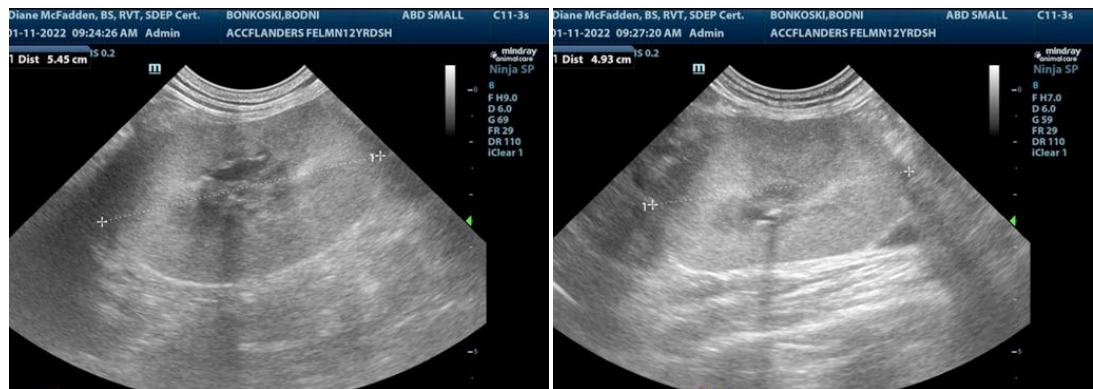
Debulking effort could be considered regarding the primary mass. However, this is likely a focal manifestation of the multi-focal process in the liver. Treatment should be based on FNA results. This may be completely benign, yet space occupying.

WEIGHT

9.5 lbs

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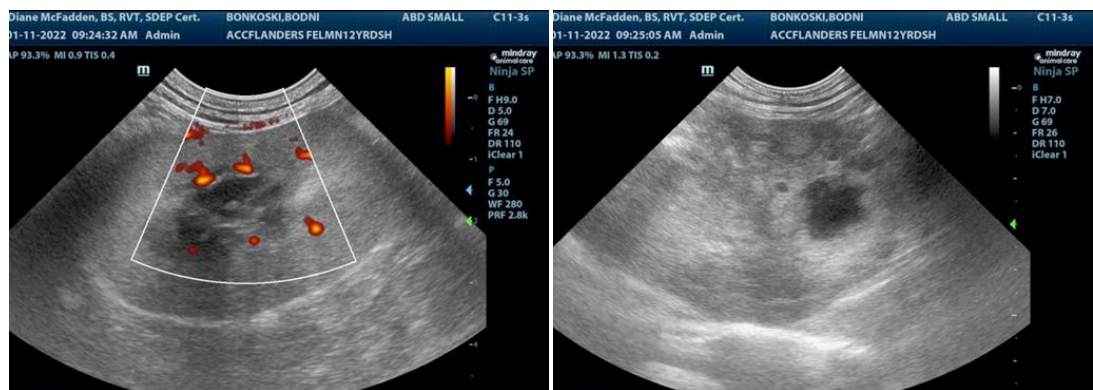


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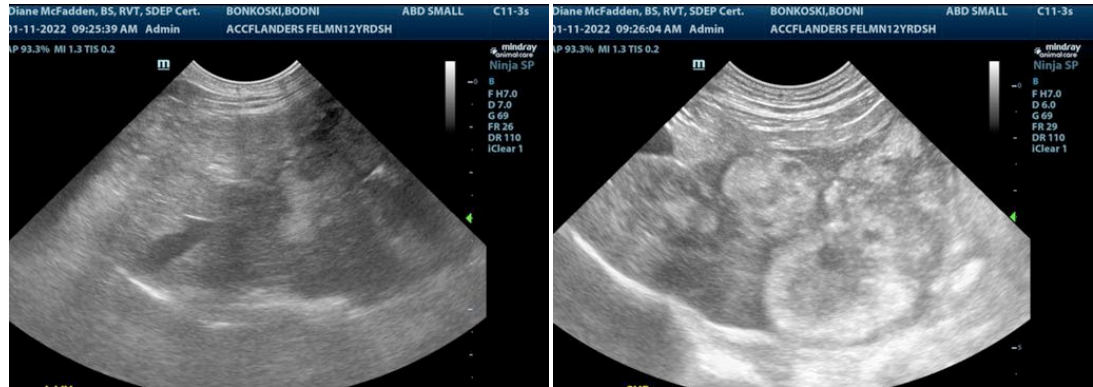
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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