

PATIENT

Thomas Cox

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

15 Years

WEIGHT

12.1 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

River's Edge Pet
Medical Center

REFERRING VET

Dr. David Gray

INVOICE

73601

DATE

3/12/26

PRESENTING CLINICAL SIGNS

Blood in UR x 2 months, no previous hx of UR issues. Otherwise healthy, Suspected UTI but with 2 months of blood concern for mass.

Current Medications: Amoxicillin, gabapentin, alprazolam, prazosin

Abnormal PE/Chem/CBC/UA Results: See attached UA: Inflammation and rods

LIMITED ULTRASONOGRAPHIC EXAMINATION

Urinary System

The urinary bladder is moderately distended with echogenic urine. The apical bladder wall is severely thickened and irregular, creating a mass effect in the region measuring 1.6 cm x 2.85 cm. Wall thickness in this region measures 1.6 cm. The region of the trigone, ureteral papillae and proximal urethra appear free of any mass lesions or calculi.

The left kidney has a normal shape and size (3.97 cm). Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

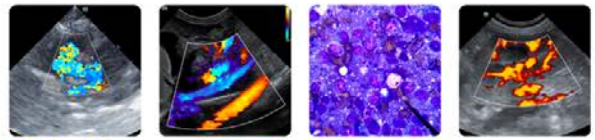
The right kidney has a normal shape and size (4.27 cm). Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

ULTRASONOGRAPHIC FINDINGS

- Thickened, irregular apical wall of the urinary bladder with highly echogenic urine – Concerning for a true mass effect, although severe apical cystitis is possible.
- Age related changes visualized associated with both kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The focal apical wall thickening is concerning for a true mass effect. A transitional cell carcinoma would be the primary differential. Recommend a urine culture (when off antibiotics for at least 5-7 days). If a free catch urine sample is highly cellular, you could consider cytology on a free catch sample (saran wrap in the litter box). Otherwise, traumatic catheterization or a fine needle aspirate could be considered, provided the owner understands that it is possible to track neoplastic cells along the needle path. If a urine culture is positive, consider appropriate antibiotic therapy and recheck ultrasound 2-3 weeks into treatment. Antibiotics should be continued beyond the point where the bladder wall has normalized ultrasonographically.



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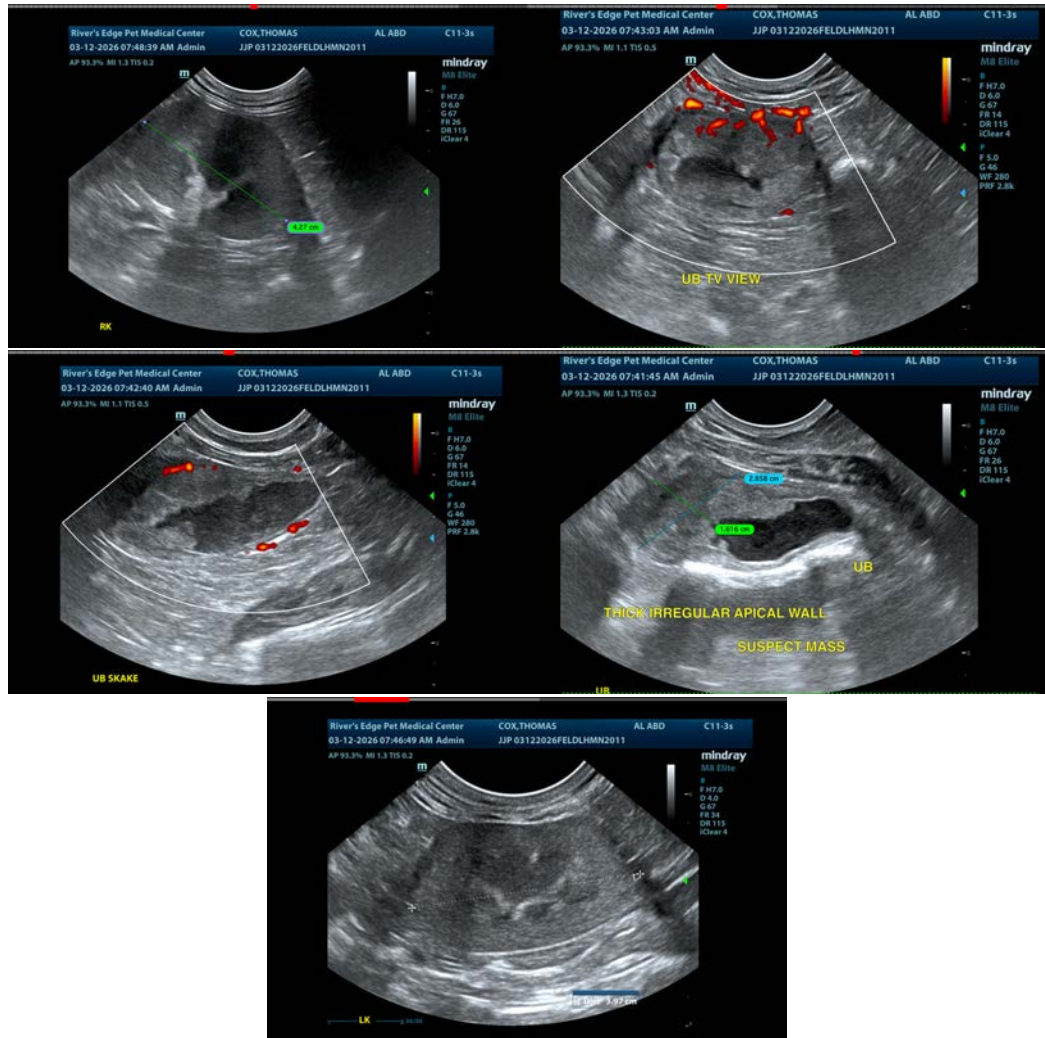
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

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