



**PATIENT**

Walden Bourgoin

**SPECIES**

Feline

**BREED**

Siamese Mix

**SEX**

MN

**AGE**

14 years

**WEIGHT**

14 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Karen Ebersole, DVM,  
DABVP (Canine and  
Feline)

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Fortin

**INVOICE**

15869

**DATE**

1/18/23

**PRESENTING CLINICAL SIGNS**

Palpable cranial abdominal mass, first noted in 6/2022 and larger on repeat exam 12/2022. Gabapentin PO and Torbugesic IV/IM for sedation.

BUN 49, Creat 3.0, proBNP 311

USG 1.019

Fast AUS: possible mid-abdominal mass.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths, sediment, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of the aortic trifurcation was free of pathology.

The left kidney was borderline subnormal in size with asymmetrical margination. Variable primarily uniform hyperechoic cortex hypertrophy was present. Moderate to marked loss of corticomedullary border demarcation was noted with reduced medullary volume. Mild left kidney hydronephrosis was present. The left kidney measured 3.0 cm in length.

The right kidney was normal in size with asymmetrical margination and variable primarily uniform hyperechoic cortex hypertrophy. Reduced medullary volume was present with no evidence of pyelectasia or hydronephrosis. The right kidney measured 3.4 cm in length.

**Adrenal Glands**

No overt pathology was noted in the area of the left or right adrenal glands.

**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 0.64 cm width at the level of the hilus.

**Liver/Gallbladder**

The liver exhibited moderate to possible marked generalized enlargement primarily owing to mildly expansive to irregular nonhomogeneous to cystic possibly consolidated mass to masses in the caudal liver extending into the level of the gastric axis and possible mid-cranial abdomen. An example of the mass measured 7.0-7.5 cm in diameter. Minor parenchymal remodeling associated with the liver parenchyma not involved with the masses was noted. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.



<b>PATIENT</b>	<b><i>Gastrointestinal</i></b>
Walden Bourgoin	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 stomach exhibited potential mild displacement secondary to caudal expansion of the nonhomogeneous to cystic liver mass / masses.
<b>SPECIES</b>	
Feline	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.
<b>BREED</b>	
Siamese Mix	Normal visible colon wall layers were present with apparent formed feces in lumen.
<b>SEX</b>	<b><i>Pancreas</i></b>
MN	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.
<b>AGE</b>	<b><i>Free Abdomen</i></b>
14 years	No omental masses, omental lymphadenopathy, or peritoneal effusion were noted.
<b>WEIGHT</b>	<b>ULTRASONOGRAPHIC FINDINGS</b>
14 lbs	<ul style="list-style-type: none"> <li>• Large, variably expansive, possibly consolidated nonhomogeneous to cystic liver mass / masses</li> <li>• Bilateral moderate to marked chronic degenerative renal changes with mild left kidney hydronephrosis</li> </ul>
<b>INTERPRETED BY</b>	<b><u>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</u></b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Sonographically, the liver masses are likely suggestive of benign variably sized to large, possibly consolidating cystic biliary adenomas. Potential for malignant criteria, i.e., cystic biliary adenocarcinoma could also be possible. However, cystic biliary adenomas are suspected, which may be commonly seen in geriatric cats and at times may exhibit moderate to significant size.
<b>IMAGING PERFORMED BY</b>	FNA cytology of the liver masses, assuming normal clotting status and using a 25-gauge needle, could be considered for further clarification, yet may prove unrewarding given the cystic component to the masses.
Karen Ebersole, DVM, DABVP (Canine and Feline)	Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. CRD Therapy with assessment and monitoring of systemic blood pressure +/- as-needed diuresis protocol would be reasonable. A guarded to possible very guarded long-term prognosis, given the renal sonographic appearance, is indicated. Potential progressive end-stage bilateral nephropathy.
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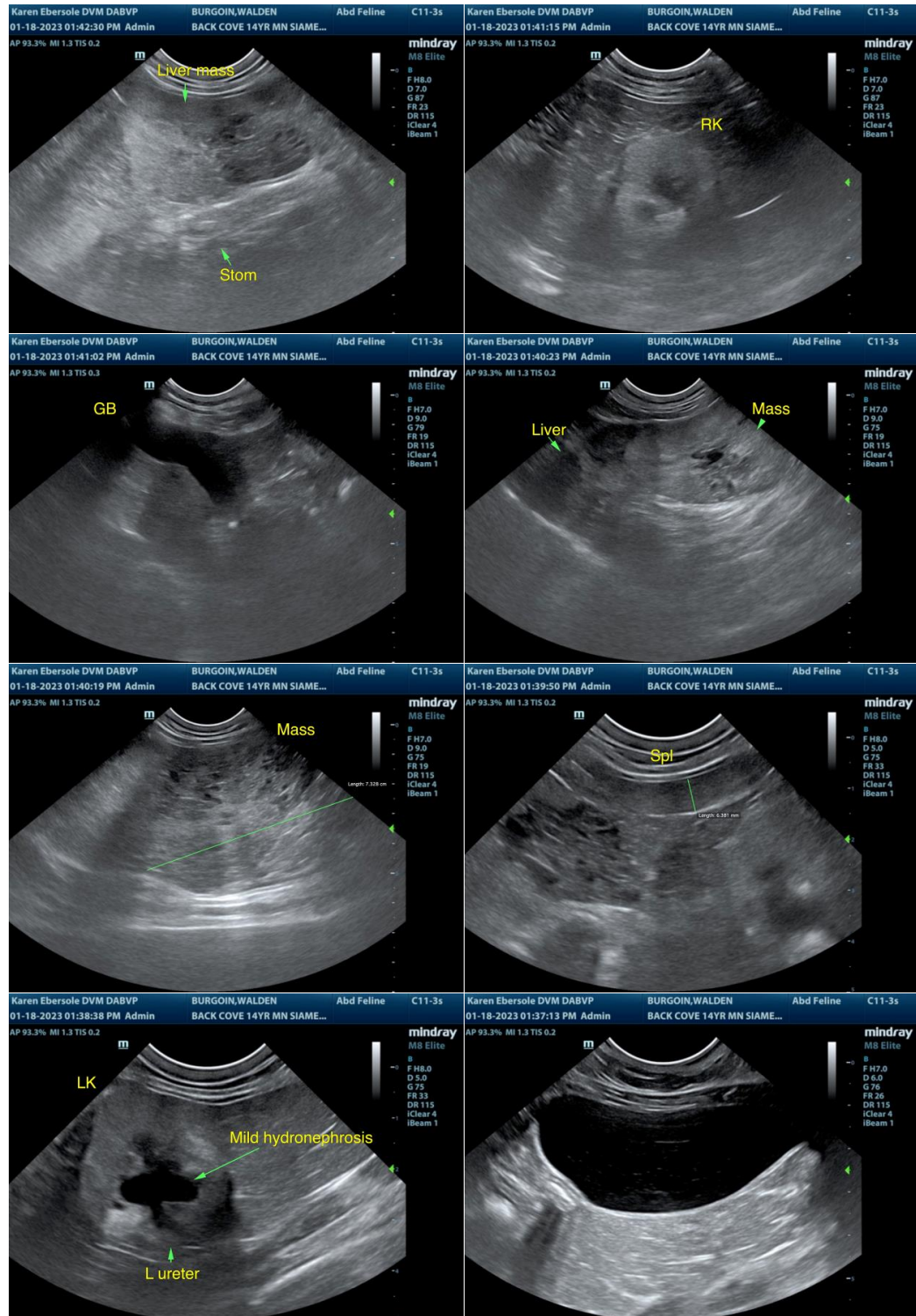
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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