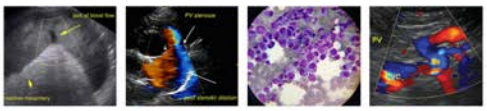
PAUS
Pet Animal Ultrasound Service
4paus.com 781-635-5677



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Peanut Carter

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

16 Years

WEIGHT

8.95 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Falmouth AH

REFERRING VET

Dr. Lilan Hauser

INVOICE

26294

DATE

10/14/21

PRESENTING CLINICAL SIGNS

Current problem: hematuria, frequent urination. U/A shows dilute urine, hematuria. Possible bladder mass seen on US guided cepto. Previous AUS 8/2018. Age related splenic change and benign splenic nodules. This is likely consistent with nodular hyperplasia or myelolipomas. Structurally normal bladder. Idiopathic cystitis is suspected. Mild proximal colonic and cecal inflammatory pattern. Early infiltrative or neoplastic colonic or cecaldisease is considered less likely. Prednisolone; Gabapentin for discomfort with arthritis. Proviable probiotic, intermittiently. Urinary system only.
Abnormal PE/Chem/CBC/UA Results: Renal profile: cbc: retics 14.8sl L chem: SDMA 15 slH (was 10) creat: 2.4slH (was 3.0) Ca: 11.6 slH U/A: cysto SG 1.014 pH 5.5 bl:3+ rbcs: 20-30

LIMITED ULTRASONOGRAPHIC EXAMINATION

The urinary bladder was normal in size and tone with non-homogeneous to pinpoint mineralized mass noted in the dorsal trigone, extending into the cystourethral junction, measuring approximately 1.5 cm length x 0.87 cm at the caudal pole. The mass appeared to extend caudally past the level of the cystourethral junction into the proximal urethra for an estimated 1-1.5 cm. Color doppler assessment of the mass confirmed blood flow. Given the non-distended urinary bladder, the urinary bladder mass did not appear to be obstructive. Anechoic urine was present with very minor particulate sediment.

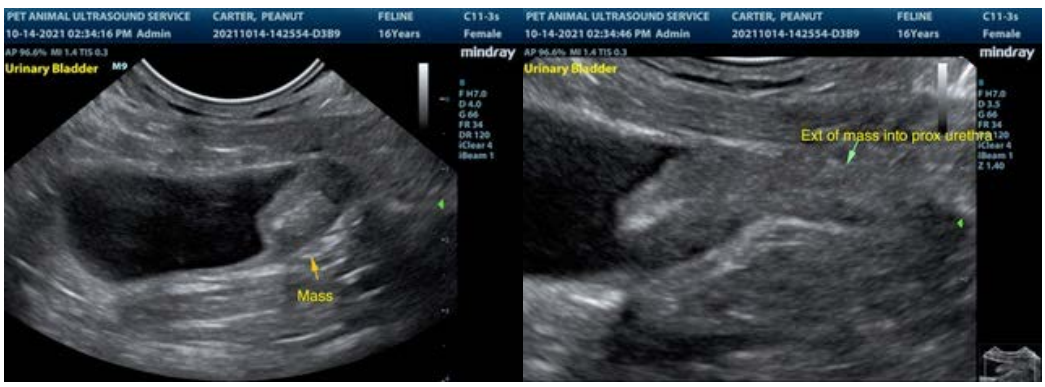
Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The right kidney measured 3.1 cm. The left kidney measured 2.9 cm.

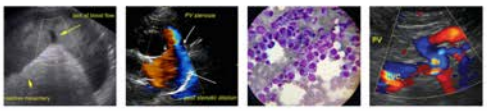
ULTRASONOGRAPHIC FINDINGS

- Pinpointedly mineralized urinary bladder mass occupying the area of the dorsal trigone and extending into the cystourethral junction and proximal urethra.
- Mild to moderate chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder mass is most suggestive of transitional cell carcinoma versus other neoplasia. Screening BRAF assay may be considered. However, if negative, biopsy would be required for definitive diagnosis. Regardless, the urinary bladder mass does not appear to be amenable to surgical resection based on location. Oncology consult may be considered empirically. Piroxicam trial +/- as needed analgesic with sonographic monitoring of the mass as well as for evidence of stranguria would be reasonable. No evidence of regional metastasis.





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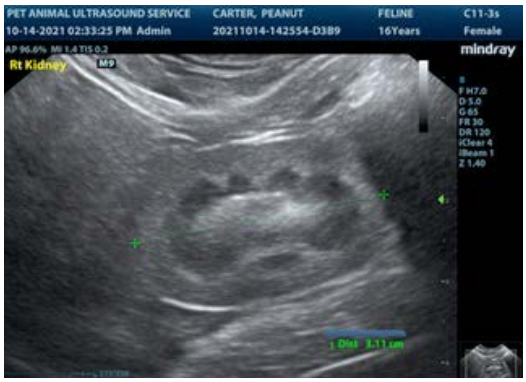

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com