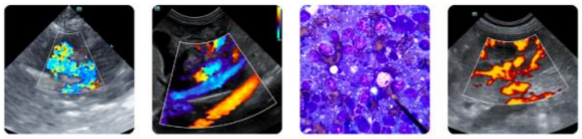


PATIENT

Finn Seasock

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

2013

WEIGHT

14.3

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Rebekah Jakum, CVT, ARDMS/RVT

HOSPITAL NAME

Easton Animal Hospital

REFERRING VET

Dr. Nankman

INVOICE

36855

DATE

12/11/25

PRESENTING CLINICAL SIGNS

History: Weight loss, vomiting, decreased appetite

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the left kidney. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.5 cm in length.

The right kidney was enlarged in size with asymmetrical margination. A nonhomogenous focally cystic to possibly cavitated right kidney mass was noted, measuring 3.5 cm in diameter. Overall, the right kidney measured approximately 5.5 cm in length. A hyperechoic right retroperitoneal tissue echogenicity was noted. No obvious visualized retroperitoneal effusion was noted.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.29 cm.

The right adrenal gland was not definitively visualized owing to increased periadrenal artifact secondary to right kidney mass.

Spleen

The spleen was overall normal in size with. Mild asymmetrical medial capsule contour. The spleen measured 0.79 cm in width at the level of the mid spleen. A solitary mildly expansive hypoechoic cranial splenic nodule was noted, measuring 0.96 cm in diameter.

Liver

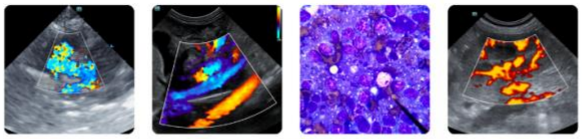
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder appeared to be divided into two compartments, both containing anechoic bile, consistent with bilobed gallbladder. The common bile duct was not visualized.

Gastrointestinal

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 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.



PATIENT

Finn Seasock

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

2013

WEIGHT

14.3

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Rebekah Jakum, CVT, ARDMS/RVT

HOSPITAL NAME

Easton Animal Hospital

REFERRING VET

Dr. Nankman

INVOICE

36855

DATE

12/11/25

The ileocolic junction measured 0.43 cm wall width. Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

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 was evident.

Free Abdomen

No evidence of visualized significant omental lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Right kidney mass
- Expansive splenic nodule
- Intact age-related left kidney
- Sonographically normal gastrointestinal tract

Secondary Findings

- Bilobed gallbladder- normal variant in a cat.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, the right kidney mass is certainly consistent with neoplastic criteria, i.e., carcinoma, sarcoma, or other. The splenic nodule was suspicious for concurrent neoplastic or metastatic criteria with splenic lymphoid hyperplasia, hematopoiesis, or granuloma possible. Further assessment may include, assuming normal clotting status, and using 25-gauge needle, right kidney and splenic nodule FNA cytology. Three-view chest radiographs are recommended if not done. Gastrointestinal support is indicated. Concurrent GI panel to include PLI/TLI/Cobalamin/Folate could be considered to assess for nonobvious intestinal or pancreatic disease as a contributing factor to the gastrointestinal signs and weight loss.

PATIENT

Finn Seasock

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

2013

WEIGHT

14.3

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Rebekah Jakum, CVT, ARDMS/RVT

HOSPITAL NAME

Easton Animal Hospital

REFERRING VET

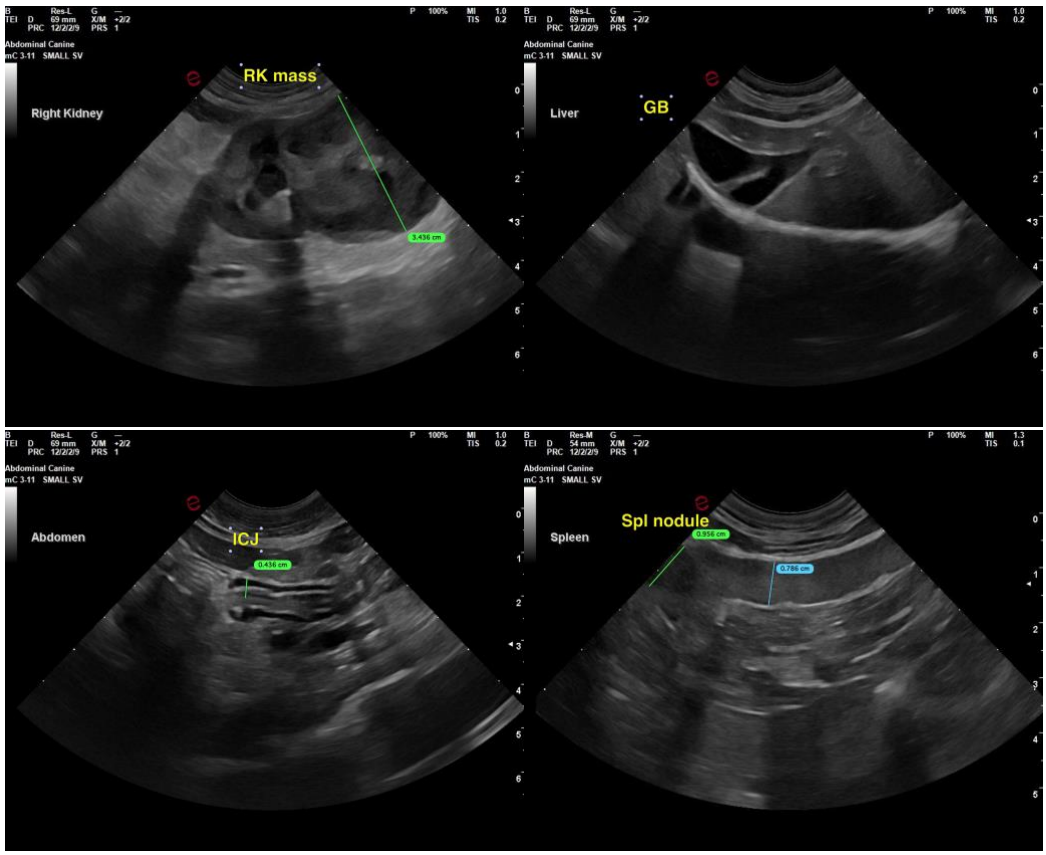
Dr. Nankman

INVOICE

36855

DATE

12/11/25



PATIENT

Finn Seasock

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

2013

WEIGHT

14.3

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Rebekah Jakum, CVT, ARDMS/RVT

HOSPITAL NAME

Easton Animal Hospital

REFERRING VET

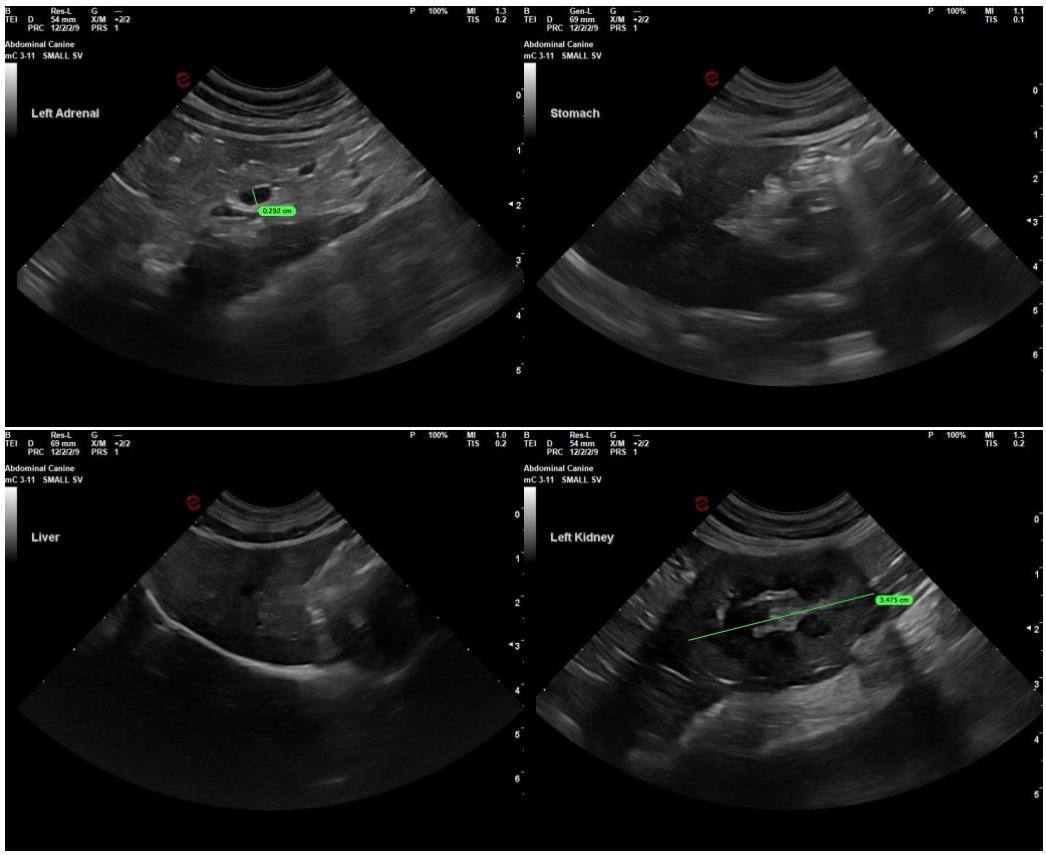
Dr. Nankman

INVOICE

36855

DATE

12/11/25



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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com