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|--|---|
| PATIENT | PRESENTING CLINICAL SIGNS |
| Daisy Voyles | hematuria with blood clots |
| SPECIES | ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN |
| Feline | <i>Urinary System</i> |
| BREED | The urinary bladder was normal in overall size and tone. A nonhomogeneous sessile-based mass lesion appearing to originate from the mid to cranioventral wall was present. This mass lesion measured 2.2 cm x 0.73 cm. Potential concurrent mass lesion vs. accumulated sediment within the dependent dorsal-apical lumen was also present, measuring approximately 0.5 cm in diameter. No calculi were noted. |
| DSH | |
| SEX | The area of the aortic trifurcation was free of pathology. |
| SF | |
| AGE | Normal size and margination were 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pyelectasia, overt pyelonephritis, or evidence of left or right retroperitoneal inflammation was noted. The left kidney measured 3.2 cm in length. The right kidney measured 3.4 cm in length. |
| 19 years | |
| WEIGHT | <i>Adrenal Glands</i> |
| 8 lbs. | No overt pathology was noted in the area of the left or right adrenal glands. |
| INTERPRETED BY | <i>Spleen</i> |
| R. McKenzie Daniel, DVM, DABVP (Canine and Feline) | 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 0.71 cm width. |
| IMAGING PERFORMED BY | <i>Liver/ Gallbladder</i> |
| Michaleen | The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal. |
| HOSPITAL NAME | <i>Gastrointestinal</i> |
| DPC Veterinary Hospital | 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. |
| REFERRING VET | |
| Dr. Rivera | 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. |
| INVOICE | Normal visible colon wall layers were present with apparent formed feces in lumen. |
| 12815 | |
| DATE | |
| 12/15/21 | |



PATIENT

Daisy Voyles

SPECIES

Feline

BREED

DSH

SEX

SF

AGE

19 years

WEIGHT

8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Michaleen

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Rivera

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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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

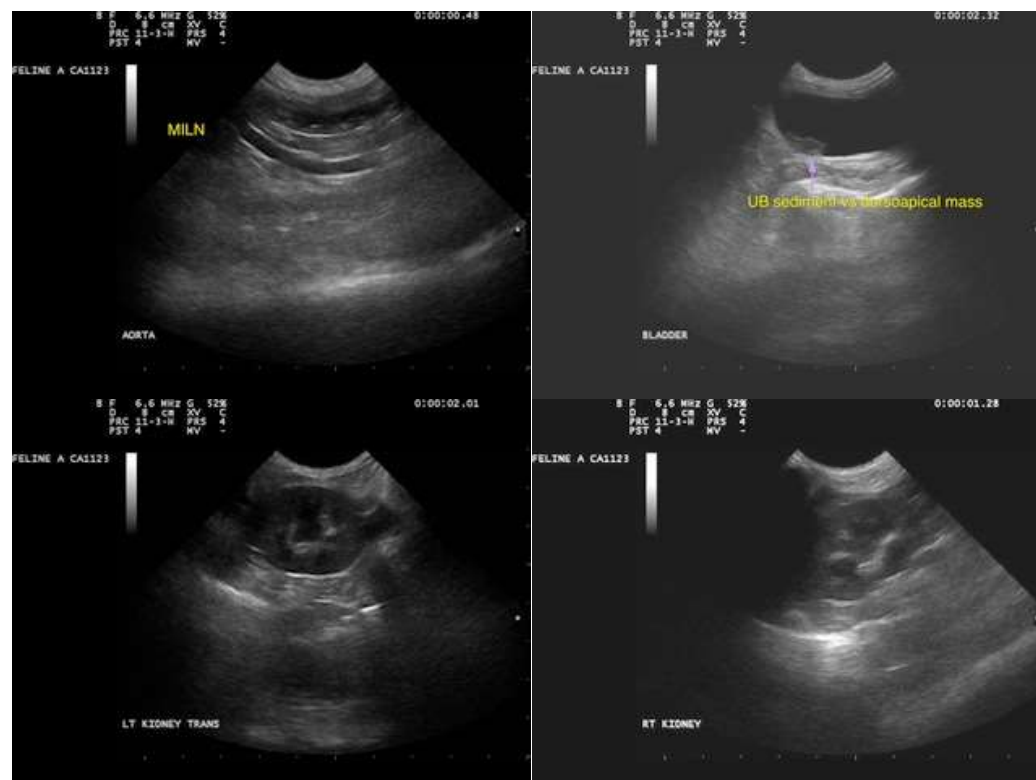
ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Mid to caudoventral sessile based urinary bladder mass lesion, potential for concurrent mass lesion vs. accumulated sediment in area of dorsal-apical urinary bladder lumen
- Mild chronic renal changes - no overt pyelonephritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder mass lesion is most concerning for neoplasia such as transitional cell carcinoma, although potential for sectorial cystitis or adhered blood clot cannot be definitively excluded. If normal renal function, empirical Piroxicam trial with monitoring of renal parameters could be considered. Ideally, urine culture and sensitivity on a sterile urine sample is recommended to rule out underlying infection. Serial sonographic monitoring of the urinary bladder for evidence of progression is recommended.





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IMAGING PERFORMED BY

Michaleen

HOSPITAL NAME

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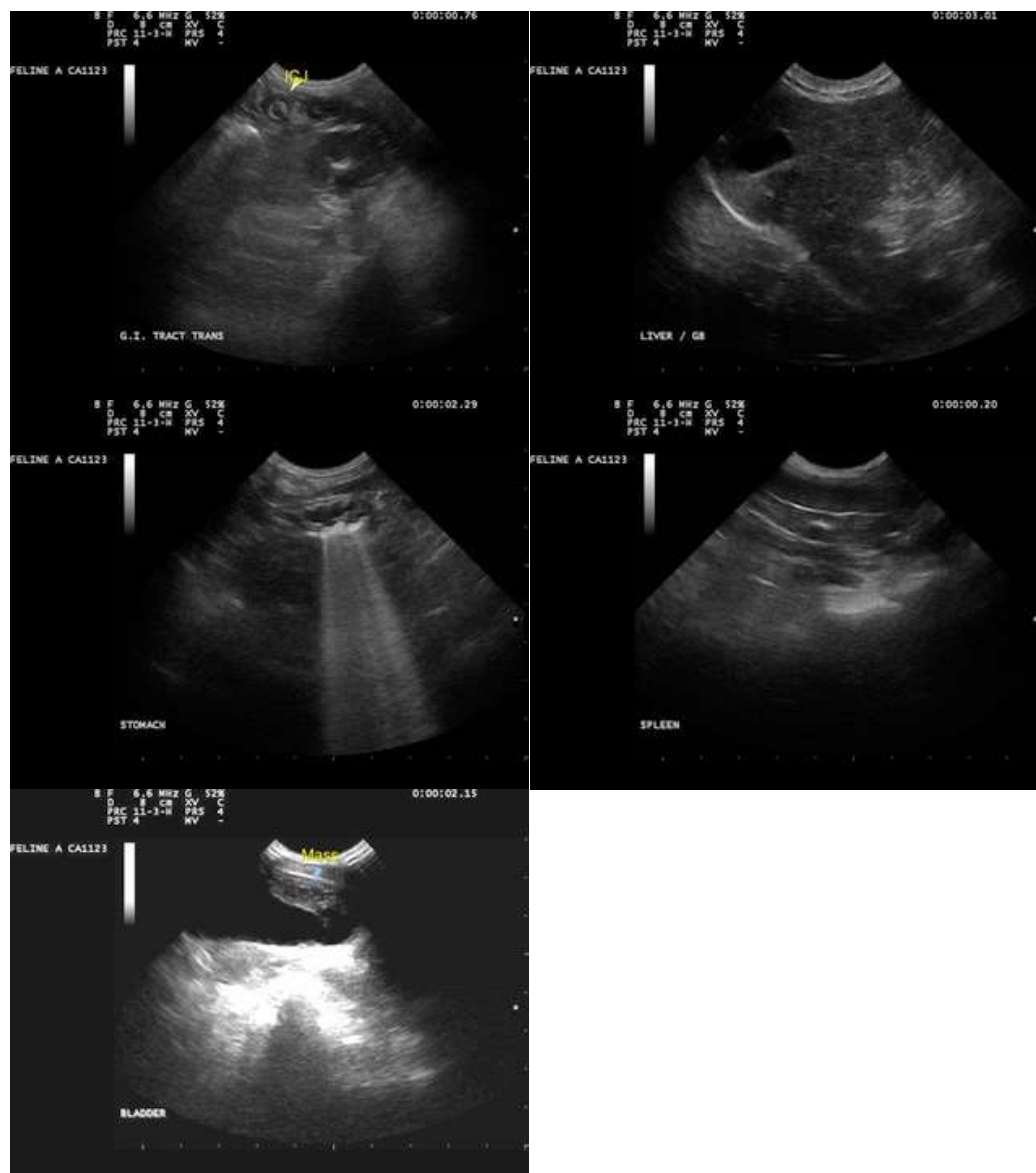
Dr. Rivera

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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