



PATIENT

PB Goktas

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

3 Years 6 Months

WEIGHT

13.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Lara Cabugawan

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr. Ghobriel

INVOICE

16577

DATE

05/29/26

PRESENTING CLINICAL SIGNS

Presented for decrease appetite, episode of vomiting, lethargy, sitting in litter box, breathing more than normal.

PE: overweight, distended abdomen painful on abdominal palpation, increase BV lung sound.

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. Primarily anechoic urine was present in the lumen. Echogenic to particulate nondependent to hyperechoic mild sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

Normal size and margination was present in the right kidney. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The right kidney measured 4.1 cm in length.

The left kidney was not definitively visualized.

Adrenal Glands

The left and right adrenal glands were not definitively visualized.

Spleen

The spleen presented asymmetrically enlarged with variably expansive nonhomogenous mass to masses with an example measuring approximately 4.0 cm to 4.5 cm in diameter.

Liver & Gallbladder

The liver revealed generalized hepatomegaly with symmetrical to rounded contour and nonhomogenous mild increased hepatic parenchyma echogenicity exhibiting variably coarse echotexture. No definitive hepatic mass or nodules were evident.

The gallbladder was not definitively 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.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The area of the pancreas was sonographically.



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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

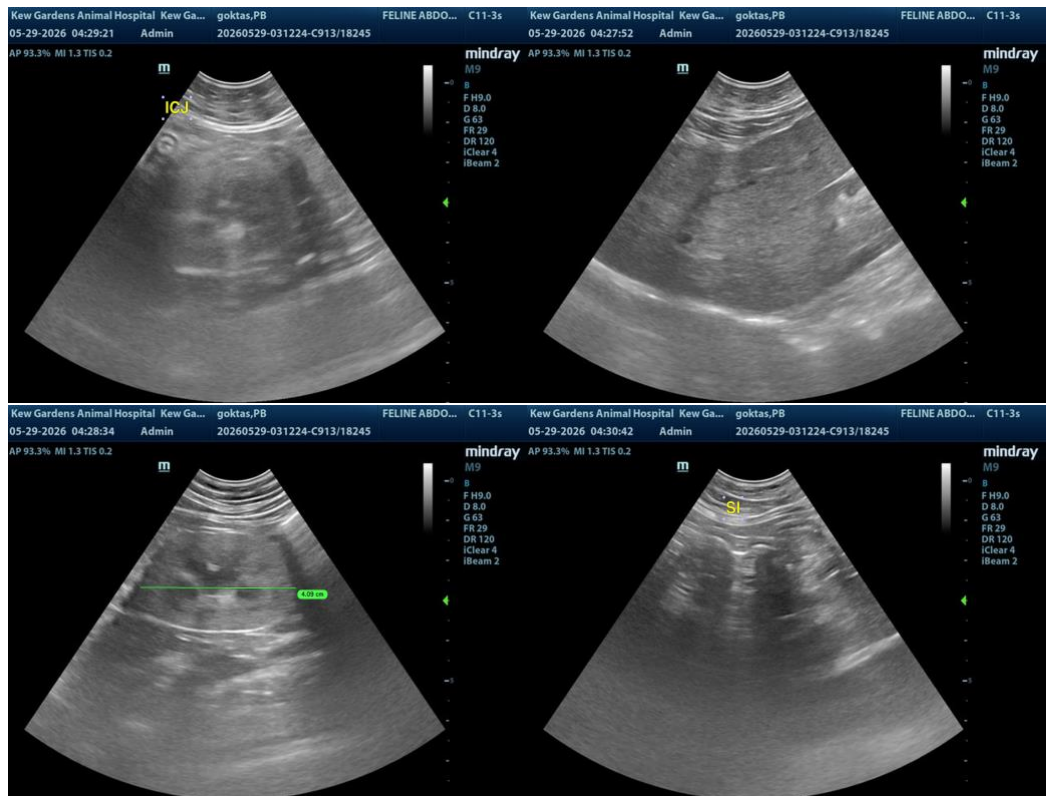
ULTRASONOGRAPHIC FINDINGS

- Splenic mass/masses.
- Enlarged nonhomogenous echogenic liver.
- Sonographically normal visualized gastrointestinal tract.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Splenic neoplastic criteria is met with primary concern for multicentric neoplasia also involving the liver. Multicentric round cell neoplasia, i.e. lymphoma or mast cell neoplasia is favored.

Further assessment may include (assuming normal clotting status and using a 25-gauge needle and with Benadryl pre-treatment) hepatosplenic FNA cytology. Gastrointestinal support is indicated pending sampling, considered essential for further clarification. Three view chest radiographs are recommended if not done.





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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.

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

info@SonoPath.com