



PATIENT	PRESENTING CLINICAL SIGNS
Murphy Antonucci	History: Patient presents for unresolving hematuria. R/O TCC vs. other. Finished Clavamox, on methimazole, metacam, and Gabapentin.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Ca+ 11.3. U/A: RBC >100, epi cells 1+, UP 3+, USG 1.021.
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
American Short Hair	The urinary bladder, cystourethral junction and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. A sessile based to polyploid like mass was present in the area of the ventral trigone measuring approximately 1-1.2 cm in diameter. The mass exhibited mild nonhomogeneous to regionally hyperechoic parenchyma suggestive of pinpoint areas of mass mineralization. Blood flow within the mass confirmed on power Doppler. Anechoic urine was present in the lumen with very minor nondependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal.
SEX	
MN	
AGE	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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral areas of pinpoint medullary mineral were present. The left kidney measured 3.9 cm in length. The right kidney measured 3.8 cm in length.
16	
WEIGHT	The area of the aortic trifurcation was free of pathology.
8 lb	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.44 cm width. No overt pathology in the area of the right adrenal gland. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured – cm width.
IMAGING PERFORMED BY	Spleen
Kelly Vazquez	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 1.0 cm in width at the level of the hilus.
HOSPITAL NAME	Liver
Legacy Animal Hospital	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. A small solitary cystic appearing intra parenchymal nodule was present in the caudal mid liver. The hepatic and portal vasculature were normal in appearance without signs of congestion.
REFERRING VET	
Dr. Potenzone	
INVOICE	
11066ag	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
DATE	Gastrointestinal
07/08/2022	



PATIENT

Murphy Antonucci

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.

SPECIES

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.

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

Pancreas

BREED

American Short Hair

The pancreas exhibited mild prominent size with areas of capsule asymmetry and mild nonhomogeneous to hypochoic parenchyma compared to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal.

SEX

MN

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

AGE

16

ULTRASONOGRAPHIC FINDINGS

- Ventral trigone urinary bladder mass
- Mild chronic renal changes with pinpoint medullary mineral
- Hepatic parenchyma remodeling with small cystic nodule-probable benign cystic biliary adenoma
- Mildly prominent to hypochoic pancreas-potential for low grade pancreatitis

WEIGHT

8 lb

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder mass is most consistent with neoplastic criteria i.e. transitional cell carcinoma. Cytospin cytology of a free catch urine sample to assess for atypical cells could be considered. A focal area of trigone cystitis is considered a less likely differential diagnosis. No overt evidence of regional metastasis was observed.

IMAGING PERFORMED BY

Kelly Vazquez

Assessment for evidence of cranial abdominal or subxiphoid discomfort on palpation +/- spec fPL could be considered if clinically indicated.

HOSPITAL NAME

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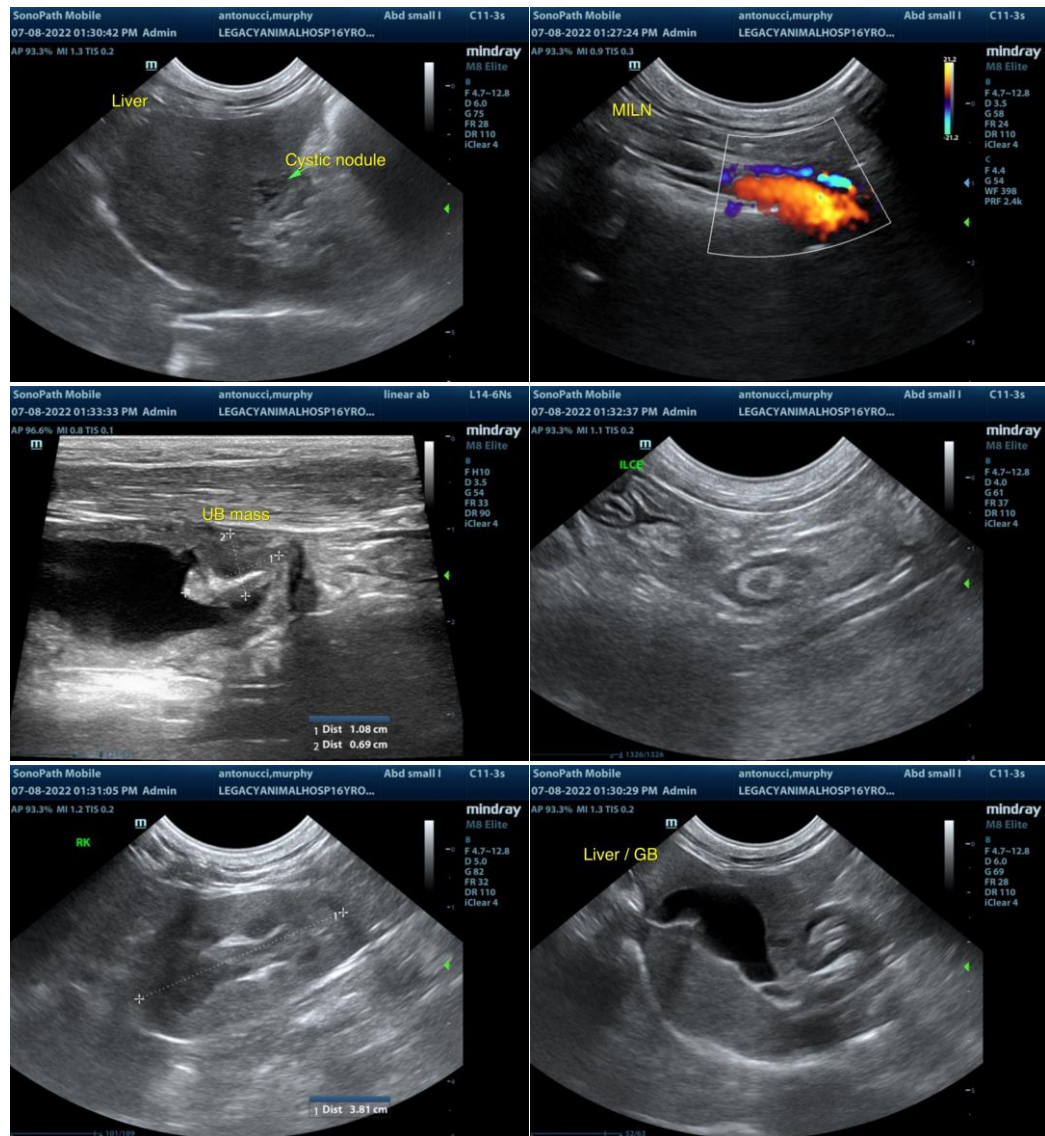
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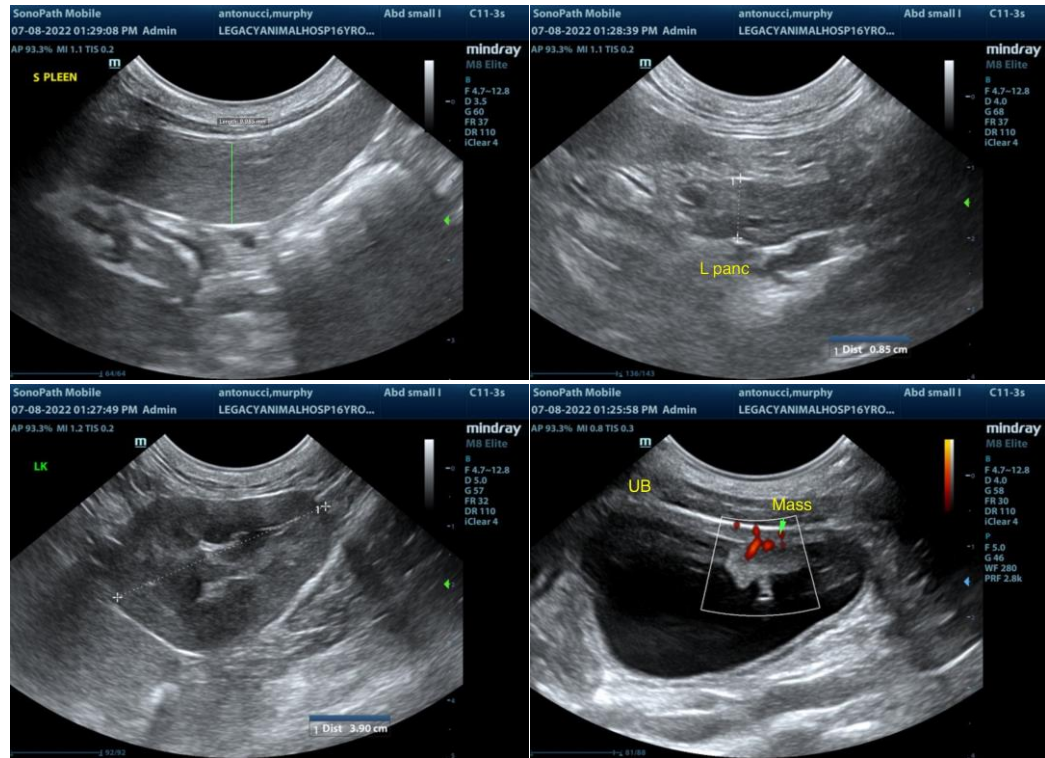
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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