



PATIENT PRESENTING CLINICAL SIGNS

Patient: Porto Birkok
History: Intermittent hematuria since April
Abnormal PE/Chem/CBC/UA Results: Crea 1.6; BUN 38; SDMA 18

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Domestic Shorthair

A large extensive non-homogenous mass occupying the majority of the mid to caudal urinary bladder was present. The mass measured approximately 4.1 cm x 2.0 cm. Focal minor cystic component noted within the mass. No overt evidence of mineralization. The mass appeared to occupy the majority of the dorsal and apical walls, potentially extending into the ventral apical wall. Doppler assessment indicated blood flow within the mass. Mild anechoic urine was present. No sediment or calculi noted. The trigone, cystourethral junction and proximal urethra were sonographically unremarkable.

SEX

Neutered Male

AGE

12 Years

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 mild non-uniform increased cortex echogenicity (noted in both kidneys) and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pyelectasia or overt pyelonephritis. The left kidney measured 3.9 cm in length. The right kidney measured 4.2 cm in length.

WEIGHT

10.1 Pounds

Adrenal Glands

The bilateral adrenal glands were normal in size and contour. Pinpoint areas of mineralization were present without capsular distortion or overt tumors. This is an age-related finding and not pathological. The left adrenal gland measured 0.41 width and the right adrenal gland measured 0.39 width. No overt pathology noted in the left or right adrenal glands.

INTERPRETED BY

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

Spleen

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 0.8 cm width.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Northfold County VS

Liver

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 mild echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Tami Ilovich, DVM

Gastrointestinal

INVOICE

13083

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.

DATE

9/16/21



PATIENT

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.

Porto Birkok

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

SPECIES

Pancreas

Feline

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This is likely consistent with age-related pancreatic changes and considered incidental.

BREED

Domestic Shorthair

ULTRASONOGRAPHIC FINDINGS

Primary Findings

SEX

- Bilateral chronic renal changes
- Extensive urinary bladder mass

Neutered Male

Secondary Findings

AGE

- Mild gallbladder debris- The gallbladder debris may be secondary to fasting or indicate nonclinical cholestasis

12 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

10.1 Pounds

The extensive urinary bladder mass is consistent with neoplasia, transitional cell carcinoma, squamous cell carcinoma, adenocarcinoma or unspecified carcinoma, leiomyoma/leiomyosarcoma or other possible. Potential for significant cystitis is considered an unlikely differential diagnosis. Biopsies are required for a definitive diagnosis with potential for oncology consult, however, the mass does not appear to be amendable to surgical resection based on location and size.

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 DABVP (Canine and Feline)

Assuming normal renal function, NSAID trial such a piroxicam with as needed analgesia and monitoring of renal parameters may be considered.

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SEX

Neutered Male

AGE

12 Years

WEIGHT

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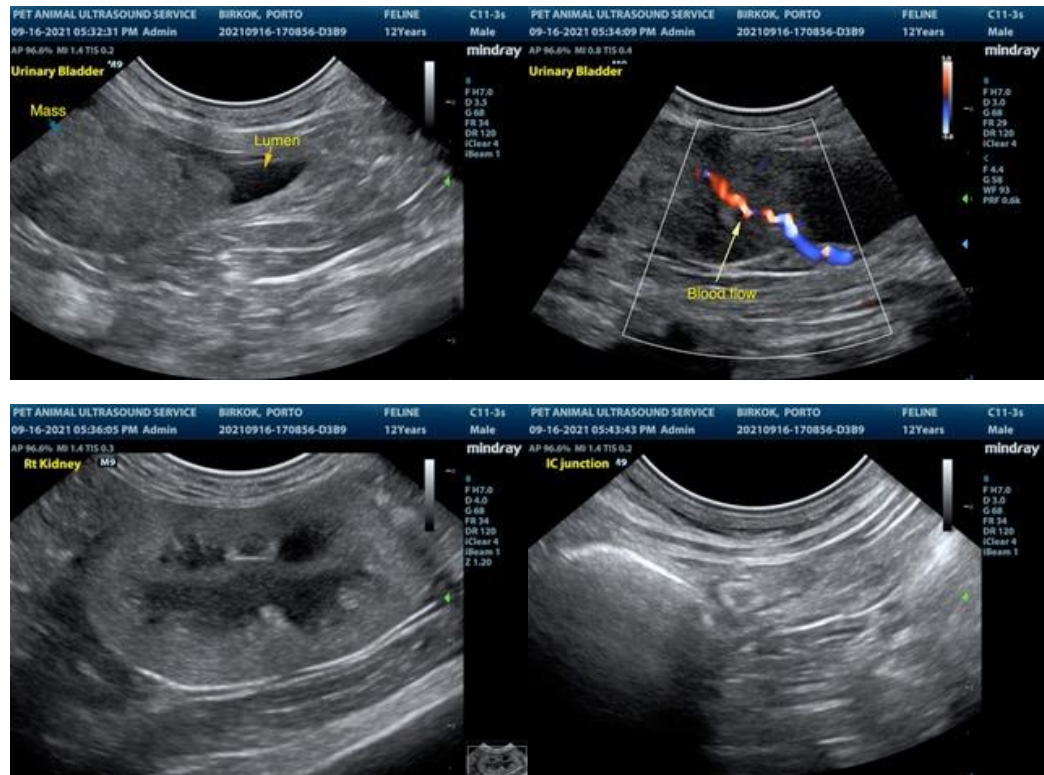
Tami Ilovich, DVM

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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.

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