

**PATIENT PRESENTING CLINICAL SIGNS**

Lucky Moulding History: Hematuria

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Feline Urinary System**

Feline

**BREED**

Domestic Shorthair

**SEX**

FS

**AGE**

17 years

**WEIGHT**

8 Pounds

The urinary bladder exhibited a ventral mural mass measuring approximately 2.0 x 1.0 cm. The mass exhibited essential isoechoic echogenicity compared to adjacent normal-appearing ventral, as well as apical, and dorsal urinary bladder wall without evidence of mural mineralization. Subjective mild mural hypertrophy was noted in the area of the cystourethral junction. The cystourethral junction wall subjectively measured 0.22 cm. The urethra was normal in structure and tone to depth of 2.0 cm. The proximal urethra measured 0.3 cm in width. Anechoic urine was otherwise present without evidence of sediment or calculi.

The area of the aortic trifurcation was free of pathology.

The bilateral kidneys were subnormal in size with asymmetrical margination. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate to marked loss of corticomedullary symmetry and definition expected for the age of the patient. Both kidneys exhibited nonobstructive medullary mineralization to renolithiasis. Mild pyelectasia was noted in both kidneys. The left kidney measured 2.8 cm in length. The right kidney measured 2.9 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.27 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.26 cm width.

**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 0.67 cm in width.

**Liver/ Gallbladder**

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 minor gallbladder debris. The cystic and common bile ducts were normal.

**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.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Dr. Sam's VHC

**REFERRING VET**

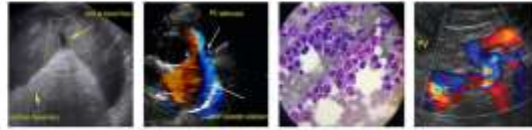
Dr. Ottinger

**INVOICE**

12291

**DATE**

9.23.2021



**PATIENT**

Lucky Moulding

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.

**SPECIES**

Feline

***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.

**BREED**

Domestic Shorthair

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

FS

**ULTRASONOGRAPHIC FINDINGS**

***Primary Findings***

**AGE**

17 years

- Ventral urinary bladder mural mass with mild subjective cystourethral junction thickening - neoplasia likely, transitional cell carcinoma, squamous cell carcinoma, or other
- Bilateral chronic degenerative renal changes with medullary mineralization / nonobstructive renolithiasis and mild pyelectasia

**WEIGHT**

8 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Potential for ventral and cystourethral junction cystitis or other nonneoplastic etiology i.e., granulomatous etiology is possible yet considered less likely. No evidence of regional metastasis was noted.

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A bladder wall biopsy would be needed for a definitive diagnosis and potential for oncology consultation.

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The pyelectasia is likely owing to chronic renal changes or pelvic scarring. Recheck renal parameters and urinalysis if not recently done is suggested.

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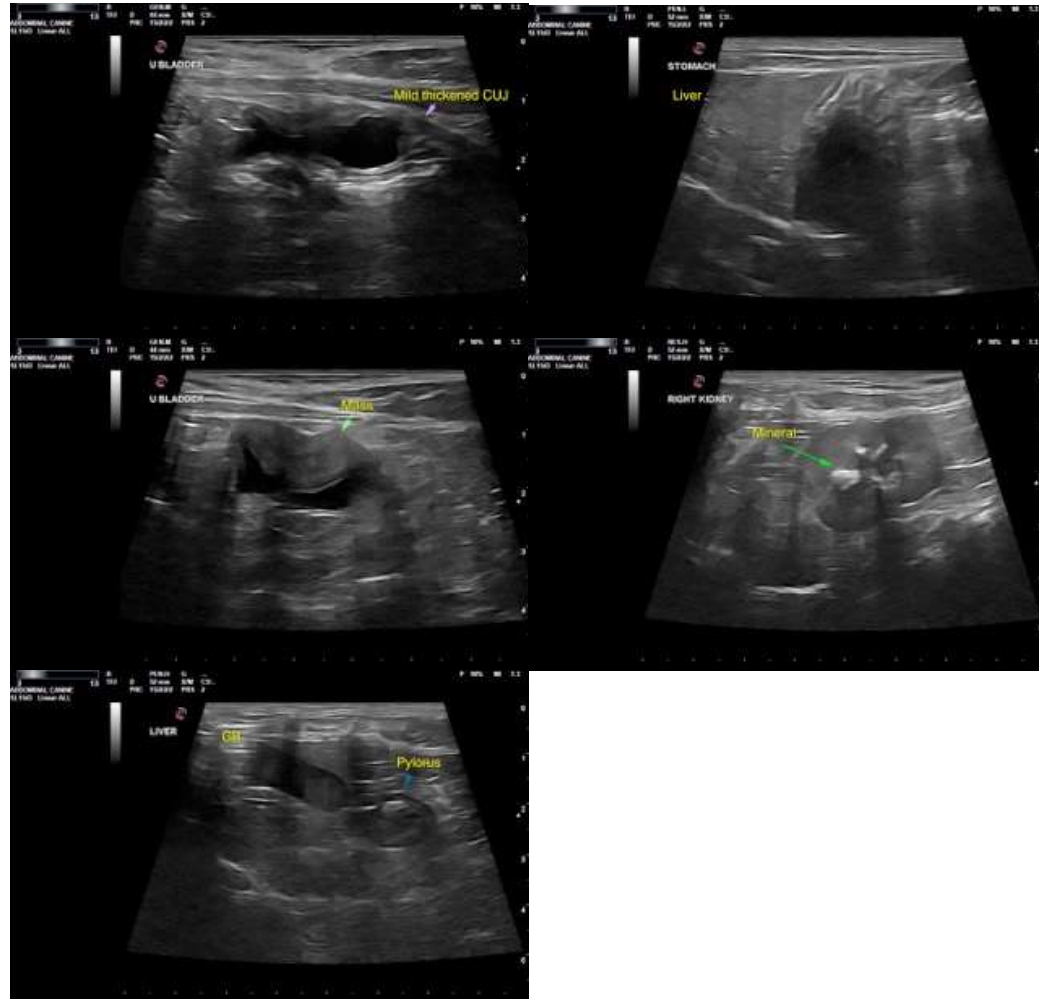
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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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