


**PATIENT PRESENTING CLINICAL SIGNS**

Thomas Kampman History: Diagnosed and treated for interstitial cystitis with good response. FIV positive.

**SPECIES** Physical Examination: N/A.

Feline Urinalysis: N/A.

CBC: N/A.

**BREED** Serum Biochemistry: N/A.

DSH Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**
**MN *Urinary System***

**Age** Full urinary bladder with a normal thickness and echogenic appearance of the wall. Irregular mottled echogenic adherent mass-like structure on the dorsal wall extending to the trigone area. Moderate amount of floating hyperechogenic sediment present with no uroliths evident.

**WEIGHT** Normal trigone area, proximal urethra, and iliac blood vessels.

14 # Normal iliac lymph nodes. Ureters not visualized.

***Reproductive System***

N/A.

***Adrenal Glands***

N/A.

***Spleen***

N/A.

***Liver***

N/A.

***Gastrointestinal***

N/A.

***Pancreas***

N/A.

***Free Abdomen***

No obvious ascites in the caudal abdomen.

**INTERPRETED BY**

Remo Lobetti, BVSc,  
MMedVet (Med), PhD, Dipl.  
ECVIM

**IMAGING PERFORMED BY**

Rita Kivircik

**HOSPITAL NAME**

Kings Veterinary Hospital

**REFERRING VET**

Rita Kivircik

**INVOICE**

303825

**DATE**

1/27/23

**PATIENT**

Thomas Kampman

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

2 years

**WEIGHT**

14 #

**ULTRASONOGRAPHIC FINDINGS**

## Primary Findings:

- Urinary bladder mass.
- Urinary bladder sediment.

## Secondary Findings:

- None.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the urinary bladder would be organized hematoma, granuloma, bacterial cystitis, sterile cystitis, adhered sediment, and neoplasia.

Initial assessment would be urinalysis, urine culture, and flushing of the bladder and if there is no change in the appearance of the mass-like structure, then catheter-assisted aspirate of the bladder mass and/or cystotomy.

Specific therapy would be dependent on an etiological diagnosis.

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**IMAGES**

**Urinary bladder**



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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.

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
[rlobetti@mweb.co.za](mailto:rlobetti@mweb.co.za)