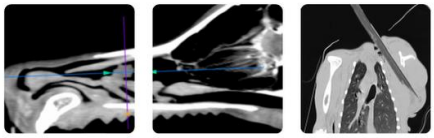

PATIENT

Sadie Cornell

SPECIES

Feline

BREED

Domestic Shorthair

SEX

FS

AGE

12Y

WEIGHT

11.1lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Amanda Mazzante, CVT

HOSPITAL NAME

Williamsport West Veterinary Hospital

REFERRING VET

Natalie Kolczynski, VMD

INVOICE

73062

DATE

12-18-25

PRESENTING CLINICAL SIGNS

History of intermittent appetence for about 5 months but became more apparent in the last 2 weeks. P seems to want to eat but will only a few bites before turning away. Distended/gassy abdomen noted during exam, but full palpation has been difficult due to P being aggressive. Tiny mineral opacity object within intestinal tract noted on radiographs in July. Historical UTI, recently treated with MARBOfloxacin.
Abnormal PE/Chem/CBC/UA Results: Culture and Sensitivity of urine showed Enterococcus.

COMPUTED TOMOGRAPHY OF THE ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Originating from the right kidney, a uniform soft tissue attenuating and peripherally accentuated contrast enhancing mass is seen; measuring 4.6 x 2.4 x 3.8 cm. The right renal soft tissue mass has ill-defined medial margins, merging with the soft tissues medially and encompassing the caudal vena cava and aorta at the same level – the caudal vena cava level with the right renal mass is compressed and cannot be appreciated caudally up to the level of L5/L6. The aortic level with the right renal mass is mildly deviated to the left and presents segmentally a decreased diameter. The retroperitoneal fat presents moderate soft tissue striation.

A very small amount of mineral attenuating material is associated with the left renal pelvis.

Originating from the left renal vein, multiple tortuous collaterals are coursing caudally.

The left kidney presents within normal limits for size, shape and organ architecture.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right renal soft tissue mass with local invasive growth and segmental compression of the caudal vena cava
- Secondary reno-venous collaterals originating from the left renal vein
- Retroperitoneal effusion
- Left sided mild nephrolithiasis without mechanical obstruction

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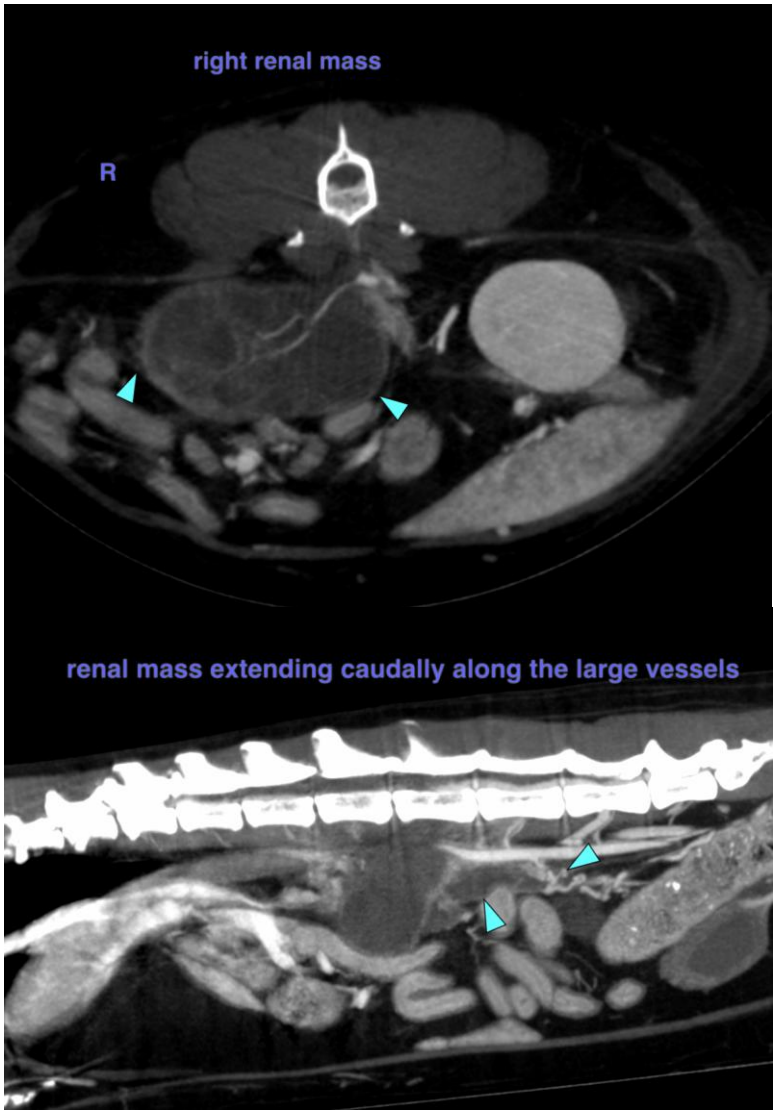
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are consistent with primary right renal soft tissue neoplasia with local invasive growth in the retroperitoneal space – involving the aorta and caudal vena cava. The odds for right renal carcinoma or sarcoma are high. FNA sampling of the right renal mass can be tried for specification. Due to the local invasive growth surgical management is not feasible here.



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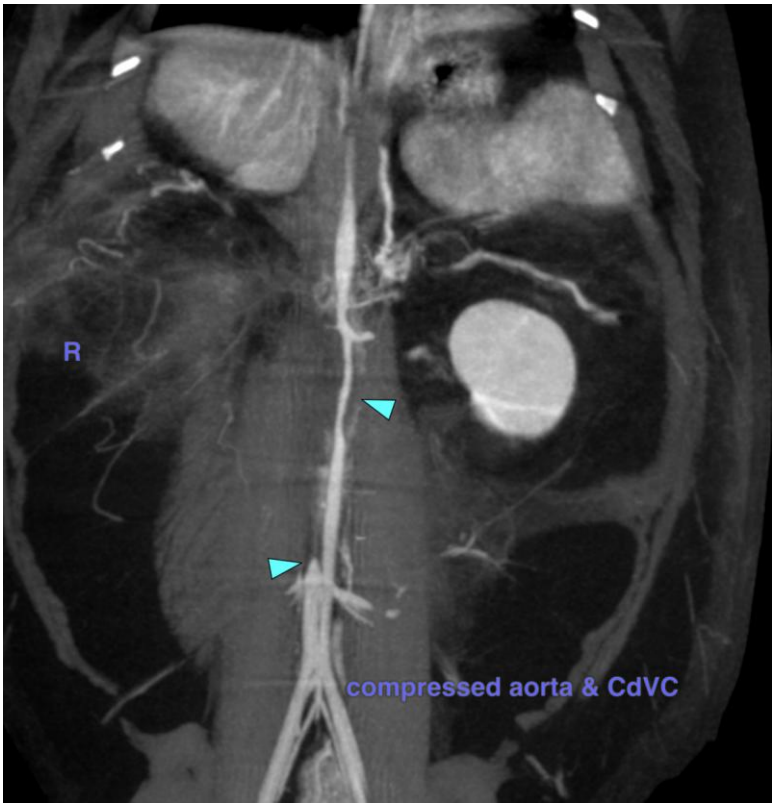

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com