

PATIENT

Lucy Grateful Dog
Rescue

SPECIES

Canine

BREED

Mixed

SEX

FS

AGE

10 years

WEIGHT

50 #

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Lara Wiseman, DVM

HOSPITAL NAME

Village Royale Animal
Clinic

REFERRING VET

INVOICE

302591

DATE

10/8/21

PRESENTING CLINICAL SIGNS

History: Hematuria.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Nodular appearance of the trigone. Thickened and irregular appearance of the proximal urethra (3.8 x 1.2 cm) with a mottled echogenic appearance and areas of mineralization. Normal iliac blood vessels.

Normal iliac lymph nodes (1.2 and 1.7 cm). Ureters not visualized.

Normal renal size (left 5.6 cm, right 6.1 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

Reproductive System

N/A.

Adrenal Glands

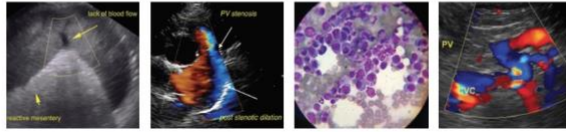
Normal shape, echogenic appearance, size, and position. Left 0.6 cm, right 0.64 cm.

Spleen

Normal size (0.9 cm) and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. Large mottled echogenic cavitory poorly vascularized mass (5.8 x 6.3 cm) in the head of the spleen with distortion of the capsule and hyperechoic appearance of the surrounding mesentery.

Liver

Normal size with a diffuse hypoechoic-to nodular appearance and some loss of portal markings. Nodules are small, parenchymal, and hypoechoic. No masses evident. Small gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Dilated bile duct (0.43 cm).



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Gastrointestinal

Normal appearance of the pylorus, stomach, duodenum, small intestine, ileo-cecal junction, and colon with normal thickness (stomach 0.51 cm, duodenum 0.47 cm), layering, and peristaltic activity.

Pancreas

Normal size (right 1 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Urethral mass.
- Splenic mass
- Nodular hepatopathy.

Secondary findings:

- Dilated bile duct.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the urethral mass would be neoplasia (transitional cell carcinoma) with granulomatous urethritis a differential diagnosis.

Etiologies for the splenic mass would be neoplasia, hematoma, granuloma, abscess.

Etiologies for the nodular hepatopathy would be reactive hyperplasia, nodular regeneration, early cirrhosis, chronic hepatitis, and infiltrative neoplasia

The dilated bile duct can be considered an incidental finding as there is no dilation of the gall bladder.

Further assessment would be 3-view thoracic radiographs, cystoscopy with biopsy or catheter-assisted aspirate of the urethral mass, and FNA cytology of the liver and splenic mass.

Palliative management would be NSAIDs and ursodiol. Although splenectomy could be considered, with the non-resectable mass it may be futile unless it is for control of possible rupture.



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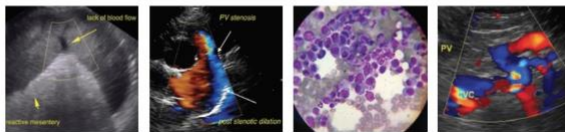
IMAGES

Urethra



Bladder trigone





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Spleen



Liver



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