



PATIENT

Stella Shirk

SPECIES

Canine

BREED

Corgi

SEX

FS

AGE

10 years

WEIGHT

36 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne
Animal Hospital

REFERRING VET

INVOICE

302595

DATE

10/8/21

PRESENTING CLINICAL SIGNS

History: Acute onset diarrhea, vomiting and anorexia.

Physical Examination: Tense abdomen, hematochezia.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: Pending. Abnormal Snap cPL.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Small urinary bladder with an irregular and thickened (0.53 cm) wall. Moderate amount of floating and dependent hyperechogenic sediment. No uroliths evident.

Normal trigone area, proximal urethra (0.37 cm) and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left kidney 5.2 cm, right 5.6 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.54 cm, right 0.61 cm.

Spleen

Normal size (1.5 cm) and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Small gall bladder containing normal anechoic bile. Normal appearance and thickness of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, duodenum, small intestine, and ileo-cecal junction with no loss of layering and normal wall thickness (duodenum 0.48 cm, jejunum 0.33 cm) and peristalsis, and no distension of the lumen. Thickening of the stomach (0.61 cm) and colon (0.38 cm) but with no loss of layering or distention of the lumen.

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:

- Gastro-enteropathy.
- Cystitis.

Secondary findings:

- None.

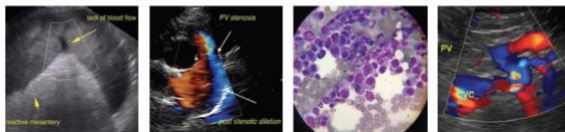
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the gastro-enteropathy would be non-specific gastro-enteritis (dietary indiscretion, toxins, viral, bacterial, helminths, protozoa) with inflammatory bowel disease and dietary hypersensitivity, less likely differential diagnoses and emerging neoplasia highly unlikely.

The appearance of the urinary bladder is typical for cystitis.

Further assessment would be urine and fecal analyses and urine culture. If there is not a satisfactory improvement with symptomatic therapy then endoscopy of both the upper and lower GI tract with biopsies should be considered.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be intestinal diet, anti-emetics, intestinal binders, and a course of fenbendazole and/or metronidazole.



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IMAGES

Urinary bladder



Stomach



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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)
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