



PATIENT PRESENTING CLINICAL SIGNS

Soulis Ortega History: Intermittent diarrhea that responds to intestinal diet, Provable, and metronidazole. Generally, clinically normal.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

BREED CBC: Normal.
Pitbull Serum Biochemistry: Marginal elevated ALT activity and urea.
Radiographic Findings: N/A.

SEX

FS

AGE

9 years

WEIGHT

64.5#

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Cathleen Whitcraft

HOSPITAL NAME

Craig Road Animal
Hospital

REFERRING VET

Dr Cathleen Whitcraft

INVOICE

302683

DATE

12/20/21

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

Normal trigone area, proximal urethra, and iliac blood vessels.
Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.9 cm, right 6.5 cm), cortico-medullary differentiation, capsule, and pelvis.

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.64/0.61 cm, right 0.62/0.77 cm.

Spleen

Normal size 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.

Gastrointestinal

Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Prominent hypoechogenic appearance of the submucosal layer of the small intestine with no loss of layering or distension of the lumen.

Pancreas

Poorly visualized but appears to be of normal size and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.



PATIENT *Free Abdomen*

Soulis Ortega No mesenteric lymphadenomegaly.
Focal hepatic lymphadenomegaly with normal shape and hypoechogenic appearance.
No ascites.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Pitbull

Primary Findings:

- Small intestinal disease.
- Focal lymphadenomegaly.

SEX

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Secondary Findings:

- None.

AGE

9 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

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Etiologies for the small intestine would be inflammatory bowel disease, parasitic enteritis, and dietary hypersensitivity, with emerging lymphoma a highly unlikely differential diagnosis.

The most likely etiology for the lymphadenomegaly would be reactive secondary to the intestinal disease with lymphadenitis and neoplasia highly unlikely differential diagnoses.

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Further assessment would be fecal analysis, cobalamin assay, and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be hypoallergenic/novel protein diet, course of fenbendazole, cobalamin supplementation, and possible prednisolone.

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IMAGES

Small intestine



Lymph node



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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