



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Skye Hennel-Greer History: Peri-anal fistulas managed with topical tacrolimus and Atopica. Recent onset multiple episodes of fecal incontinence. Polypnea at night.

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

Urinalysis: N/A.

**BREED** Previous CBC: Normal.

GSD Previous Serum Biochemistry: Normal.

Radiographic Findings: N/A.

**SEX**

FS

**AGE**

10 years

**WEIGHT**

39.4 kg

**INTERPRETED BY**

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

**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.

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

Normal iliac lymph nodes (1.3 cm). Ureters not visualized.

Normal renal size (left 6.4 cm, right 7.2 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

**Adrenal Glands**

Normal shape, size, echogenic appearance, and position. Left 0.55/0.38 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. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.1 cm).

**Gastrointestinal**

Normal appearance of the pylorus, stomach, duodenum, small intestine, and ileo-cecal junction with normal thickness, layering and peristaltic activity. Thickening of the wall of the colon but with no loss of layering or distension of the lumen. Fecal material within the colon.

**INVOICE**

302567

**DATE**

9/21/21

**IMAGING PERFORMED BY**

Dr Andrew Holmes

**HOSPITAL NAME**

Cedarview Animal Hospital

**REFERRING VET**

Dr Andrew Holmes



**PATIENT** *Pancreas*

Skye Hennel-Greer Normal size and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Canine No mesenteric lymphadenomegaly.  
No ascites.

**BREED**

GSD

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Primary Findings:

FS

- Colitis.

**AGE**

Secondary Findings:

10 years

- None.

**WEIGHT**

39.4 kg

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Etiologies for the colitis would be helminths, granulomatous colitis, inflammatory bowel disease, dietary hypersensitivity, emerging neoplasia.

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Although the colitis could account for the fecal incontinence, spinal cord disease and damage to the anal sphincter from the peri-anal fistulae should be considered.

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Further assessment would be fecal analysis, neurological examination, lumbar spine radiographs, and colonoscopy with biopsies.

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Specific therapy would be dependent on an etiological diagnosis.

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**PATIENT IMAGES**

Skye Hennel-Greer

**Colon**

**SPECIES**

Canine

**BREED**

GSD

**SEX**

FS

**AGE**

10 years

**WEIGHT**

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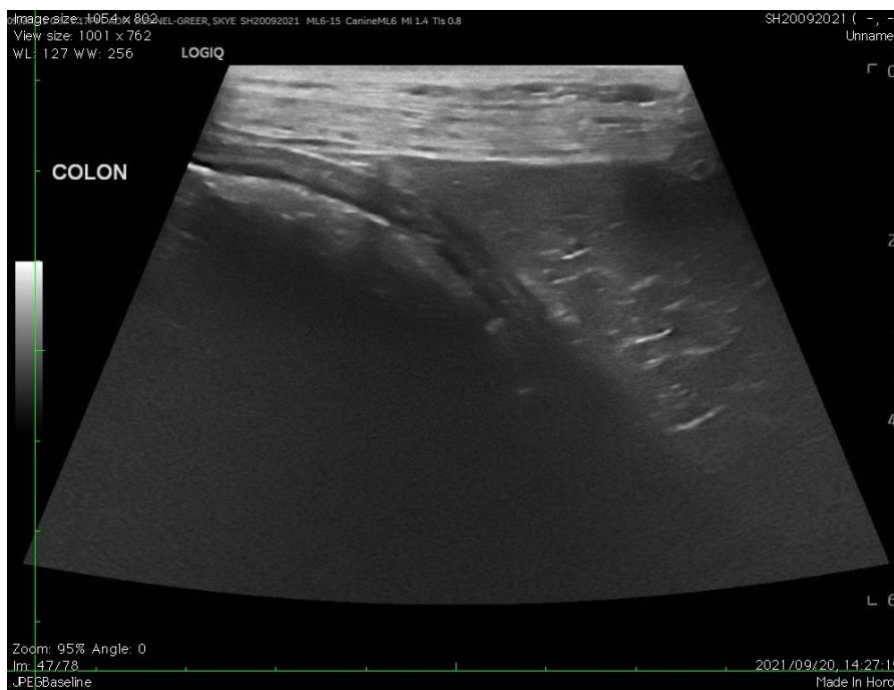
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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)