


PATIENT

Frankie Boomer Bliss James

SPECIES

Canine

BREED

Airedale

SEX

MN

Age

9 years

WEIGHT

80 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Kimberly Barron

HOSPITAL NAME

 Northshore Veterinary
 Hospital

REFERRING VET

Kimberly Barron

INVOICE

303827

DATE

1/27/23

PRESENTING CLINICAL SIGNS

History: Hindlimb weakness.

Physical Examination: N/A.

Urinalysis: Normal.

CBC: Normal.

Serum Biochemistry: Normal.

Radiographic Findings: Lumbar spine changes, splenomegaly.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System

Full urinary bladder with a normal thickness and echogenic 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. Ureters not visualized.

Normal renal size (left 5.5 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

Adrenal Glands

Not visualized.

Spleen

Enlarged with an increased echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Poorly visualized. Gall bladder and bile duct not visualized.

Gastrointestinal

Visualized sections of the GI tract have a normal appearance, wall thickness, peristaltic activity, and no distension of the lumen.

Pancreas

Not visualized.

**PATIENT*****Free Abdomen***

Frankie Boomer Bliss James

No mesenteric lymphadenomegaly.
No ascites.**SPECIES**

Canine

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

BREED

- Splenomegaly

Airedale

Secondary Findings:

SEX

- None.

MN

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenomegaly would be reactive, hyperplasia, congestion, and splenitis, with infiltrative neoplasia, an unlikely differential diagnosis.

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Further assessment would be 4Dx, PCR for vector borne disease, 3-view thoracic radiographs, and FNA cytology of the spleen.

Specific therapy would be dependent on an etiological diagnosis.

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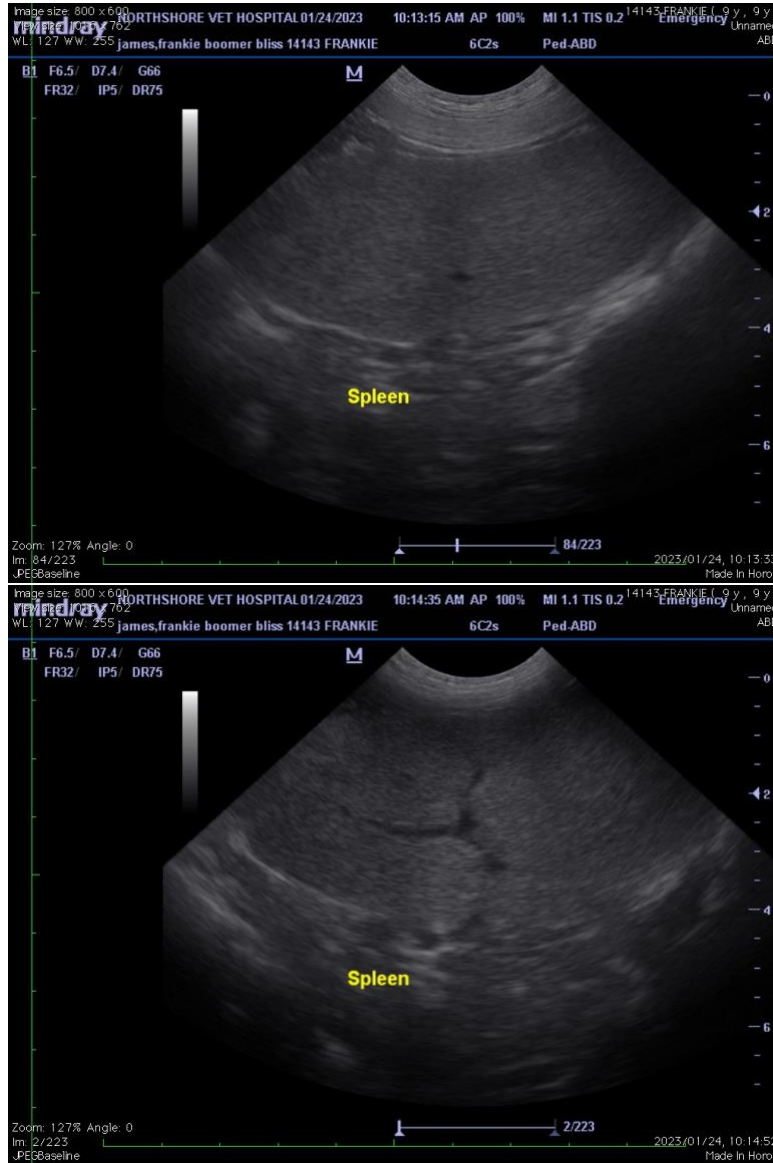
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IMAGES

Spleen



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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.

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