

PATIENT

Ben Belong

SPECIES

Canine

BREED

Basenji

SEX

MN

AGE

3 years

WEIGHT

10.2 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Lisa Bancroft, DVM

HOSPITAL NAME

Treasure Coast Animal
Emergency

REFERRING VET

Dr Angela Cail

INVOICE

303739

DATE

1/7/22

PRESENTING CLINICAL SIGNS

History: Vomiting, possible foreign material ingestion.

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.

Normal proximal urethra and iliac blood vessels.

Iliac lymphadenomegaly (0.8 x 1.8 cm) with rounded shaped and mottled echogenic appearance. Ureters not visualized.

Normal renal size (left 4.8 cm, right 4 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

Small hypoechogenic prostate (1.4 cm).

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.39 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. 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.



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, and ileo-cecal junction with no loss of layering, normal wall thickness (duodenum 0.44 cm, jejunum 0.31 cm) and peristalsis, and no distension of the lumen. Segmental thickening of the colon with no loss of layering. Ingesta and fluid distended stomach with no obvious evidence of pyloric obstruction.

Pancreas

Normal size 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:

- Gastritis distension.
- Colitis.
- Lymphadenomegaly.

Secondary findings:

- None.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

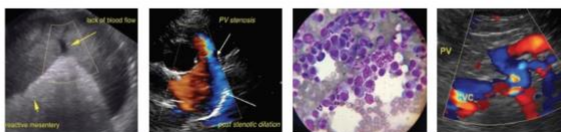
Etiologies for the colitis would be non-specific colitis, helminths, inflammatory bowel disease, granulomatous colitis, and emerging neoplasia.

The most likely etiology for the lymphadenopathy would be reactive to the colitis with lymphadenitis and infiltrative neoplasia differential diagnoses.

Although there is no obvious gastric foreign body evident, with the history pyloric obstruction still needs to be considered. Repeat ultrasound after 24 hours would be recommended and if there is still ongoing gastric distension then laparotomy would be indicated.

Further assessment would be fecal analysis, rectal cytobrush, and possibly FNA cytology of the lymph nodes and colonoscopy with biopsies.

Specific therapy would be dependent on an etiological diagnosis.



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IMAGES

Stomach



Iliac lymph node





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Colon

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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