


PATIENT PRESENTING CLINICAL SIGNS

Dipper Michaelsen

History: N/A.

SPECIES

Canine

Physical Examination: N/A.

Urinalysis: N/A

BREED

Bulldog Mix

CBC: Anemia, thrombocytopenia.

Serum Biochemistry: Elevated bilirubin.

Radiographic Findings: Splenomegaly.

SEX

MN

Age

7 years

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 (0.4 cm), and iliac blood vessels.

WEIGHT

56 #

Normal iliac lymph nodes (1.2 cm). Ureters not visualized.

Normal renal size (left 5.9 cm, right 6.4 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

INTERPRETED BY

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

Reproductive System

Small hypoechogenic prostate (0.8 cm).

Adrenal Glands

Normal position, echogenic appearance, and shape. Enlarged left gland (0.82/0.7 cm), normal size of right gland (0.7/0.69 cm).

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Sonya Myers, DVM

HOSPITAL NAME
Spleen

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Emergency

Enlarged (2.8 cm) with a mottled echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

REFERRING VET

Dr Adams

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing moderate amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.2 cm).

INVOICE

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Gastrointestinal
DATE

1/7/23

Normal appearance of the duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.32 cm, jejunum 0.33 cm) and peristaltic activity, and no distension of the lumen. Thickening of the gastric wall (0.9 cm) with no loss of layering with moderate amount of ingesta within the stomach.

**PATIENT****Pancreas**

Dipper Michaelsen

Normal size (right 1.2 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES**Free Abdomen**

Canine

Normal mesenteric lymph nodes (2.3 cm).
No ascites.

BREED

Bulldog Mix

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Splenomegaly.
- Gastropathy.
- Left adrenomegaly.

SEX

MN

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Secondary Findings:

- Gall bladder sediment.

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**INTERPRETED BY**

Etiologies for the spleen would be reactive, hyperplasia, splenitis, and infiltrative neoplasia.

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

Etiologies for the gastropathy would be non-specific gastritis (viral, bacterial, helminths, toxins, dietary indiscretion), *Helicobacter* gastritis, ulcerative gastritis, and inflammatory bowel disease, with emerging neoplasia, a less likely differential diagnosis.

IMAGING PERFORMED BY

Sonya Myers, DVM

The left adrenomegaly is most likely disease stress with emerging Cushing's disease, a differential diagnosis.

HOSPITAL NAME

With the anemia, thrombocytopenia, hyperbilirubinemia, and splenomegaly, immune-mediated hemolytic anemia and vector-borne disease should be considered.

Oviedo Veterinary Care and
Emergency

Further assessment would be fecal analyses, in-saline-agglutination/Coombs' test, 4Dx, FNA cytology of the spleen, and possibly gastroscopy with biopsies.

REFERRING VET

Dr Adams

Specific therapy would be dependent on an etiological diagnosis.

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IMAGES

Spleen



Stomach



INTERPRETED BY

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

IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

Oviedo Veterinary Care and Emergency

REFERRING VET

Dr Adams

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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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