



PATIENT

Maisee Feinberg

SPECIES

Canine

BREED

Maltipoo

SEX

FS

AGE

11½ years

WEIGHT

11.4 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Calusa Veterinary
Center

REFERRING VET

INVOICE

303454

DATE

10/4/22

PRESENTING CLINICAL SIGNS

History: Severe anemia and thrombocytopenia.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: Anemia, thrombocytopenia.

Serum Biochemistry: N/A.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and echogenic appearance of the wall. Moderate amount of floating hyperechogenic sediment. No uroliths evident.

Normal trigone area, proximal urethra (0.2 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4 cm, right 4.2 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

N/A.

Adrenal Glands

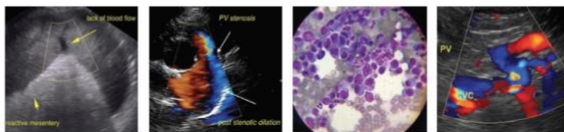
Normal shape, echogenic appearance, position, and size. Left 0.4 cm, right 0.34 cm.

Spleen

Normal size (1.1 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. Focal small hypoechogenic nodule (0.4 cm) in the body of the spleen. 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 (0.2 cm).



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.5 cm, jejunum 0.29 cm) and peristaltic activity, and no distension of the lumen. Focal hypoechogenic mass (1.7 cm) in the wall of the gastric fundus with a hyperechogenic appearance of the surrounding mesentery. Normal appearance of the rest of the stomach.

Pancreas

Normal size (right 1.1 cm) 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:

- Gastric mass.
- Splenic nodule.

Secondary findings:

- Age-related renal changes.
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the gastric mass would be neoplasia, granuloma, and focal perforation. With the anemia, superficial ulceration is highly likely.

Etiologies for the splenic nodule would be reactive, hyperplasia, granuloma, hematoma, abscess, and neoplasia.

Although the anemia and thrombocytopenia are most likely from the gastric mass, immune-mediated-hemolytic anemia needs to be considered.

Further assessment would be urinalysis, 3-view thoracic radiographs, Coombs'/in-saline-agglutination test, FNA cytology of the gastric mass and splenic nodule, and gastroscopy with biopsies.

Specific therapy would be dependent on an etiological diagnosis. From its appearance and site, surgical reaction of the mass appears feasible. Symptomatic therapy would be gastric protectants – omeprazole and sucralfate.



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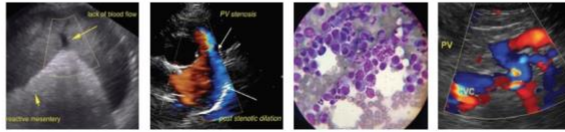
IMAGES

Spleen



Urinary bladder





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Stomach

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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)
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