



PATIENT

Cookie Cookie

SPECIES

Canine

BREED

SEX

FS

AGE

years

WEIGHT

INTERPRETED BY

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

IMAGING PERFORMED BY

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast Animal
Emergency

REFERRING VET

Dr Cail

INVOICE

303513

DATE

10/31/22

PRESENTING CLINICAL SIGNS

History: N/A.

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

Empty urinary bladder with a diffuse thickened and irregular 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 4.6 cm, right 5.2 cm), echogenic appearance, cortico-medullary differentiation, pelvis and capsule.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.57 cm, right 0.57 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 curvilinear capsule. No nodules or masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen.



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Pancreas

Normal size (right 1.5 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:

- Urinary bladder thickening.

Secondary findings:

- Gall bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS IMAGES

Etiologies for the urinary bladder would be chronic bacterial cystitis, sterile cystitis, and neoplasia.

Further assessment would be urinalysis, urine culture, BRAF assay, and catheter-assisted aspirate/biopsy of the urinary bladder wall. Full thickness biopsy of the urinary bladder wall may, however, be required for a final etiological diagnosis.

Specific therapy would be dependent on an etiological diagnosis.



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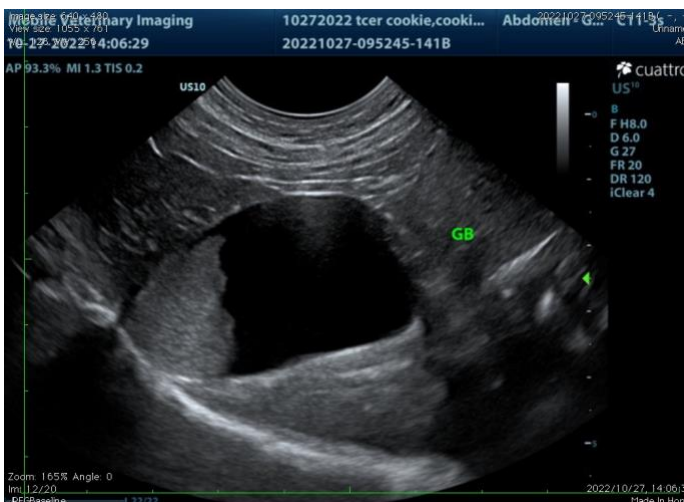
WEIGHT

IMAGES

Urinary bladder



Gall bladder



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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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