



PATIENT PRESENTING CLINICAL SIGNS

Jojo Banks History: Tenesmus, loose feces, poor appetite.

SPECIES Physical Examination: Normal.

Canine Urinalysis: N/A.

CBC: Neutrophilia, monocytosis, thrombocytopenia.

BREED Serum Biochemistry: Low albumin, elevated globulins, ALT activity, amylase and PSL.

Maltese Mix Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Male **Urinary System**

AGE Full urinary bladder with a normal thickness and appearance of the wall. Focal mottled echogenic mass on the dorsal wall that does not appear to be infiltrating the wall. Normal anechoic urine with no sediment or uroliths evident.

WEIGHT Normal trigone area, proximal urethra, and iliac blood vessels.

18 # Normal iliac lymph nodes. Ureters not visualized.

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

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

Reproductive System

Prostamegaly with a hyperechogenic appearance and multiple parenchymal anechoic cysts of various sizes. Normal appearance of the peri-prostatic tissue.

IMAGING PERFORMED BY

Dr Paul Kim Normal appearance of the left testicle. Enlarged and irregular right testicle with a mottled echogenic and nodular appearance.

HOSPITAL NAME Adrenal Glands

Ridgefield Park Animal Hospital Normal shape, echogenic appearance, position, and size. Left 1.37 cm, right 1.13 cm.

REFERRING VET Spleen

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

INVOICE Liver

303520 Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Small gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct.

DATE

11/2/22



PATIENT *Gastrointestinal*

Jojo Banks Normal appearance of the 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.

SPECIES *Pancreas*

Canine Normal size (left 1.1 cm) with a mottled echogenic appearance and an irregular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

BREED *Free Abdomen*

Maltese Mix No mesenteric lymphadenomegaly.
No ascites.

SEX

Male

ULTRASONOGRAPHIC FINDINGS

AGE

11 years

Primary Findings:

- Prostate pathology.
- Right testicular pathology.
- Urinary bladder mass.
- Chronic pancreatitis.

WEIGHT

18 #

Secondary Findings:

- Age-related renal changes.

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ECVIM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the prostate would be benign cystic hyperplasia, abscessation, and prostatitis, with neoplasia an unlikely differential diagnosis.

IMAGING PERFORMED BY

Dr Paul Kim

Etiologies for the right testicle would be orchitis and neoplasia.

HOSPITAL NAME

Ridgefield Park Animal
Hospital

Etiologies for the urinary bladder would be cystitis, granuloma, hematoma, polyploid cystitis, and emerging neoplasia.

REFERRING VET

Dr Paul Kim

Further assessment would be urinalysis, urine culture, prostatic wash cytology and culture, and catheter-assisted aspirate/biopsy of the urinary bladder mass. As the bladder mass is small and away from the trigone area, surgical resection should be considered as well as castration.

Specific therapy of the would be dependent on an etiological diagnosis.

INVOICE

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PATIENT IMAGES

Jojo Banks **Prostate**

SPECIES

Canine

BREED

Maltese Mix

SEX

Male

AGE

11 years

WEIGHT

18 #

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Remo Lobetti, BVSc,
MMedVet (Med), PhD, Dipl.
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Urinary bladder





PATIENT **Testicle**

Jojo Banks

SPECIES

Canine

BREED

Maltese Mix

SEX

Male

AGE

11 years

WEIGHT

18 #



Pancreas

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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