


PATIENT PRESENTING CLINICAL SIGNS

PATIENT Boomer Bartee History: Hypertension, distended abdomen, polypnea, pacing.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

BREED Bichon Mix CBC: Thrombocytosis

Serum Biochemistry: Elevated ALP and GGT activity, bilirubin, cholesterol, and triglycerides. Normal ACTH stimulation test.

Radiographic Findings: N/A.

SEX

MN

Age

13 years

WEIGHT

24 #

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System

Full urinary bladder with a mild thickening and irregular appearance of the apical wall. Rest of the wall has a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal trigone area, proximal urethra (0.3 cm), and iliac blood vessels.

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

Normal renal size (left 4.4 cm, right 4.6 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule. Focal anechoic cortical cyst (1.2 cm) in the caudal pole of the left kidney. Bilateral pinpoint mineralization.

Reproductive System

Prominent appearance of the prostate for a castrated dog (0.9 x 1.7 cm) with a regular shape, hypoechoic appearance, and multifocal areas of parenchymal mineralization.

Adrenal Glands

Normal position, echogenic appearance, and bilaterally enlarged. Normal shape of the right gland, rounded appearance of the left gland. Left 0.77/0.5 cm, right 0.74/0.57 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. Mottled echogenic irregular vascularized parenchymal mass (1.9 x 2.2 cm) in the body of the spleen with bulging of the overlying capsule. Smaller parenchymal nodules (\pm 1 cm) in the rest of spleen.

Liver

Enlarged with rounded edges, increased appearance, loss of portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing small amount of adherent hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.2 cm).

INTERPRETED BY

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Sonya Myers, DVM

HOSPITAL NAME

Copper Point Veterinary
Hospital

REFERRING VET

Dr Privette

INVOICE

303594

DATE

11/23/22


PATIENT *Gastrointestinal*

Boomer Bartee Segmental thickening of the stomach (1.8 cm), small intestine (0.53 cm) and colon (0.6 cm) with no loss of layering, normal peristaltic activity, and no distension of the lumen.

SPECIES *Pancreas*

Canine Normal size (right 0.9 cm, left 0.7 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

BREED *Free Abdomen*

Bichon Mix Normal mesenteric lymph nodes (0.4 x 3.3 cm).
No ascites.

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ULTRASONOGRAPHIC FINDINGS
Primary Findings:

- Hepatopathy.
- Splenic mass/nodules.
- Bilateral adrenomegaly.
- Gastroenteropathy.
- Prostamegaly
- Cystitis.

Secondary Findings:

- Age-related renal changes.
- Gall bladder sediment

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the hepatopathy would be metabolic, reactive, hyperplasia, acute hepatitis (viral, bacterial, toxins). Leptospirosis, and infiltrative neoplasia.

Etiologies for the splenic mass/nodules would be reactive, hyperplasia, granulomas, hematomas and neoplasia.

Etiologies for the adrenomegaly would be disease stress and pituitary-dependent Cushing's disease.

Etiologies for the gastroenteropathy would be non-specific (viral, bacterial, protozoa, helminths, toxins, dietary indiscretion), *Helicobacter* gastritis, ulcerative disease, inflammatory bowel disease, dietary hypersensitivity, and granulomatous disease.

Although the appearance of the prostate may be an incidental finding, emerging neoplasia needs to be considered.

Further assessment would be urine and fecal analyses, FNA cytology of the splenic mass, splenic nodules and liver, prostatic wash cytology, low dose dexamethasone suppression test, and endoscopy of both the upper and lower GI tract with biopsies. *Leptospira* PCR/serology could also be considered



PATIENT

Specific therapy would be dependent on an etiological diagnosis.

Boomer Bartee

IMAGES

SPECIES

Stomach

Canine

BREED

Bichon Mix

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Colon

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PATIENT Spleen

Boomer Bartee

SPECIES

Canine

BREED

Bichon Mix

SEX

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PATIENT Liver

Boomer Bartee

SPECIES

Canine

BREED

Bichon Mix

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Prostate

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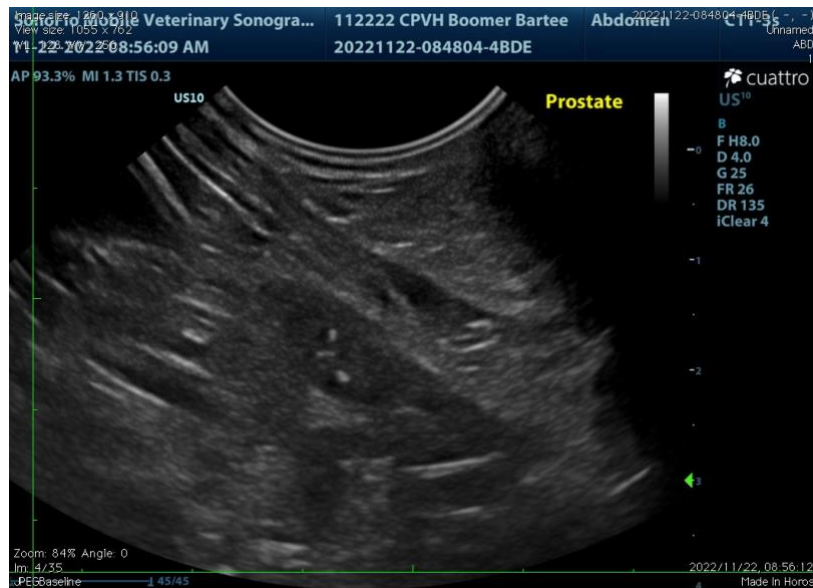
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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