



PATIENT PRESENTING CLINICAL SIGNS

Sadie Koopman History: ADR, lethargy, inappetence.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

BREED CBC: Mild anemia and thrombocytopenia.

Beagle Serum Biochemistry: Elevated ALP activity, globulins, cholesterol, and amylase.

Radiographic Findings: N/A.

SEX

FS

Age

10 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.

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

17.2 kg Normal iliac lymph nodes. Ureters not visualized.

INTERPRETED BY

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

Normal renal size (left 5.8 cm, right 5.6 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

IMAGING PERFORMED BY

Dr Stan Gira

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.52 cm.

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Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. Large mottled echogenic irregular cavitatory parenchymal vascularized mass in the head of the spleen with bulging of the overlying capsule.

REFERRING VET

Dr Mariusz Chmielinski

Liver

Enlarged with rounded edges, mottled echogenic appearance, some loss of portal markings, and regular curvilinear capsule. Small hyperechogenic parenchymal nodule (0.8 cm) in the left lobe. No masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness and appearance of the gall bladder wall. Normal bile duct.

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Gastrointestinal

Normal appearance of the 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. Thickening of the gastric wall with no loss of layering.

**PATIENT** *Pancreas*

Sadie Koopman

Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine

No mesenteric lymphadenomegaly.
Small amount of ascites.

BREED

Normal size of portal vein and caudal vena cava.

Beagle

ULTRASONOGRAPHIC FINDINGS**SEX**

Primary Findings:

FS

- Splenic mass.
- Hepatopathy.
- Ascites.

Age

10 years

Secondary Findings:

WEIGHT

17.2 kg

- Gall bladder sediment.
- Hepatic nodule.
- Gastric wall thickening.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenic mass would be organized hematoma, granuloma, organized abscess and neoplasia.

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Etiologies for the hepatopathy would be nodular hyperplasia, chronic hepatitis, copper/iron hepatitis, granulomatous disease, and neoplasia.

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Although the gastric thickening may merely be an incidentally finding, inflammatory disease, helminths, *Helicobacter* gastritis, and ulcerative disease needs to be considered.

REFERRING VET

Dr Mariusz Chmielinski

The ascites is most likely hemabdomen.

Further assessment would be 3-view thoracic radiographs, echocardiography, and FNA cytology of the liver and splenic mass. Splenectomy should also be considered as it could be both diagnostic and therapeutic.

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Specific therapy would be dependent on an etiological diagnosis.



PATIENT

Sadie Koopman

SPECIES

Canine

BREED

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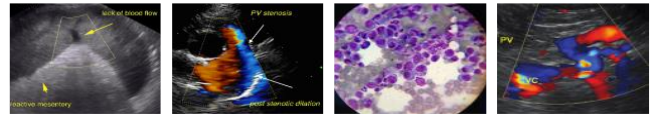
IMAGES

Spleen



Liver





PATIENT

Stomach

Sadie Koopman

SPECIES

Canine

BREED

Beagle

SEX

FS

Age

10 years

WEIGHT

17.2 kg



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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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