



**PATIENT PRESENTING CLINICAL SIGNS**

Katie Peters History: Acute onset vomiting, diarrhea, and anorexia. Initially improved with symptomatic therapy but relapsed with anorexia and ADR. History of elevated ALP activity.

**SPECIES** Physical Examination: Abdominal pain.

Canine Urinalysis: N/A.

**BREED** CBC: N/A.

Labrador Mix Serum Biochemistry: Abnormal electrolytes, elevated ALP activity.  
Radiographic Findings: N/A.

**SEX**

FS

**AGE**

13 years

**WEIGHT**

54.2#

**INTERPRETED BY**

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

**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.

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.3, right 4.9 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal capsule and pelvis.

**Reproductive System**

N/A.

**Adrenal Glands**

Normal size, shape, position, and echogenic appearance.

**Spleen**

Normal size and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

**Liver**

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing both adherent and non-adherent hyperechogenic sediment. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

**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. Diffuse hyperechogenic appearance of the gastric wall. Fluid, gas and small amount of ingesta within the stomach.

**IMAGING PERFORMED BY**

Dr Jo Goodman

**HOSPITAL NAME**

Evendale Blue Ash Pet  
Hospital

**REFERRING VET**

Dr Stephanie Wehmer

**INVOICE**

302784

**DATE**

2/26/22



**PATIENT** *Pancreas*

Katie Peters Normal size and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Canine No mesenteric lymphadenomegaly.  
No ascites.

**BREED**

Labrador Mix

**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

**SEX**

FS

- Gastritis.
- Gall bladder sediment.

**AGE**

13 years

Secondary Findings:

- Age-related renal changes.

**WEIGHT**

54.2#

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the gastritis would be non-specific (toxins, dietary indiscretion, parasitic,), dietary hypersensitivity, inflammatory bowel disease, ulcerative disease, *Helicobacter* gastritis, and emerging neoplasia.

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Although the appearance of the gall bladder may be an incidental finding, an emerging mucocele needs to be considered.

Further assessment would be fecal analysis and gastroscopy

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Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be to continue with the current therapy but to add gastric protectants (sucralfate, omeprazole) and possibly ursodiol for the gall bladder.

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**PATIENT IMAGES**

Katie Peters **Stomach**

**SPECIES**

Canine

**BREED**

Labrador Mix

**SEX**

FS

**AGE**

13 years

**WEIGHT**

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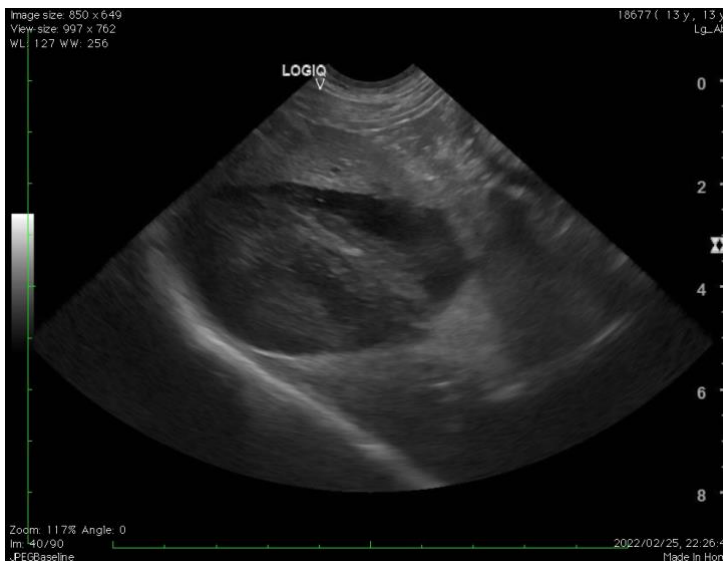
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**Gall bladder**



**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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