


**PATIENT PRESENTING CLINICAL SIGNS**

Cooper Poisson  
 History: Lethargic, melena.  
**SPECIES**  
 Canine  
 Physical Examination: N/A.  
 Urinalysis: N/A.  
**BREED**  
 Golden retriever  
 CBC: Regenerative anemia (21%).  
 Serum Biochemistry: Hypoalbuminemia.  
 Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**
**MN *Urinary System***

**Age**  
 12 years  
 Full urinary bladder with a normal thickness and echogenic appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

**WEIGHT**  
 Normal trigone area, proximal urethra (0.9 cm), and iliac blood vessels.  
 Normal iliac lymph nodes (3.1 cm). Ureters not visualized.

Normal renal size (left 8.1 cm, right 7.8 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

**INTERPRETED BY *Reproductive System***

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

***Adrenal Glands***

Normal position, echogenic appearance, and shape. Normal size of the right gland (0.58/0.53 cm), plump size of left (0.79/0.5 cm).

**IMAGING PERFORMED BY *Spleen***

Sonya Myers, DVM  
 Normal size and echogenic appearance. Smooth homogenous parenchyma, normal vasculature, and regular curvilinear capsule. Multiple hypoechoic parenchymal nodules up to 1.4 x 2.4 cm in size.

***Liver***

Normal size with a mottled echogenic and nodular appearance, some loss of portal markings, and regular curvilinear capsule. Nodules are hypoechoic, parenchymal and up to 0.6 cm in size. No masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.3 cm).

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**DATE**

2/4/23



**PATIENT**

***Gastrointestinal***

Cooper Poisson

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.48 cm, duodenum 0.49 cm, jejunum 0.45 cm, colon 0.19 cm) and peristaltic activity, and no distension of the lumen. Irregular hypoechoic jejunal mass (3.6 x 7.6 cm) with a hyperechoic appearance of the mesentery surrounding it.

**SPECIES**

Canine

***Pancreas***

**BREED**

Golden retriever

Normal size (right 1.3 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

***Free Abdomen***

**SEX**

MN

Mesenteric lymphadenomegaly (2.3 x 5.5 cm) with a rounded shape and hypoechoic appearance.

**Age**

12 years

No ascites.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

Primary Findings:

- Jejunal mass.
- Splenic nodules.
- Nodular hepatopathy.
- Mesenteric lymphadenomegaly
- Plump left adrenal gland.

**INTERPRETED BY**

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

Secondary Findings:

- Age-related renal changes.

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Copper Point Veterinary  
Hospital

With the jejunal mass, mesenteric lymphadenomegaly, and nodular appearance of the spleen and liver the most likely diagnosis would be metastatic neoplasia (lymphoma, carcinoma, sarcoma), with granulomatous disease a differential diagnosis.

**REFERRING VET**

Dr Privette

The most likely etiology for the left adrenal gland would be disease stress.

Further assessment would be 3-view thoracic radiographs and FNA cytology of the mass and splenic and hepatic nodules.

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Specific therapy would be dependent on an etiological diagnosis. As the mass is ulcerated (intestinal blood loss), surgical resection could be considered as palliative therapy.

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**PATIENT**

Cooper Poisson

**SPECIES**

Canine

**BREED**

Golden retriever

**SEX**

MN

**Age**

12 years

**WEIGHT**

**IMAGES**

**Jejunum**



**Spleen**

**INTERPRETED BY**

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 MMedVet (Med), PhD, Dipl.  
 ECVIM

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Copper Point Veterinary  
 Hospital

**REFERRING VET**

Dr Privette

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**PATIENT**

**Liver**

Cooper Poisson

**SPECIES**

Canine

**BREED**

Golden retriever

**SEX**

MN

**Age**

12 years

**WEIGHT**



**Mesenteric lymph node**

**INTERPRETED BY**

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 MMedVet (Med), PhD, Dipl.  
 ECVIM

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Copper Point Veterinary  
 Hospital

**REFERRING VET**

Dr Privette



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.

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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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