



PATIENT PRESENTING CLINICAL SIGNS

Lola Gobin History: Chronic hemorrhagic feces, weight loss.

SPECIES Physical Examination: Thin.

Canine Urinalysis: N/A.

CBC: N/A.

BREED Serum Biochemistry: Hypoalbuminemia.

Springer spaniel Radiographic Findings: N/A.

SEX

FS

AGE

11 years

WEIGHT

15.2 kg

INTERPRETED BY

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

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Small urinary bladder with a diffusely irregular and thickened wall (0.48 cm) containing large amount of floccular mottled echogenic sediment. No uroliths evident.

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.1 cm, right 5.6 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation and normal blood flow, capsule, and pelvis.

Reproductive System

N/A.

IMAGING PERFORMED BY

Dr Alastair Westcott,
DVM

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 2.41 x 0.73/0.6 cm, right 2.69 x 0.59/0.51 cm.

HOSPITAL NAME

Spleen

Normal size (1.2 cm) and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

REFERRING VET

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Liver

Normal size with a diffuse mottled echogenic and nodular appearance and loss of portal markings. Nodules are parenchymal, hyperechogenic, non-shadowing, and up to 1.7 cm in size. Full gall bladder containing moderate amount of adherent hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

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PATIENT *Gastrointestinal*

Lola Gobin Normal appearance of the stomach and ileo-cecal junction with no loss of layering, normal wall thickness (stomach 0.46 cm), and no distension of the lumen. Focal irregular thickening of the duodenum/jejunum (0.55 cm) with loss of layering but no distention of the lumen. Segmental irregular thickening of the colon (up to 0.49 cm) with some of loss of layering but no distension of the lumen.

SPECIES

Canine

BREED *Pancreas*

Springer spaniel Normal size (right 1 cm, left 0.6 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SEX *Free Abdomen*

FS No mesenteric lymphadenomegaly.

AGE No ascites.

11 years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

15.2 kg

Primary Findings:

- Intestinal thickening.
- Nodular hepatopathy.
- Urinary bladder pathology.

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Secondary Findings:

- Gall bladder sediment.
- Age-related renal changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the intestinal thickening would be lymphoma with granulomatous enteritis and colitis an important differential diagnosis.

HOSPITAL NAME

Etiologies for the nodular hepatopathy would be reactive, granulomatous disease, abscessation, nodular hyperplasia, and infiltrative neoplasia.

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Etiologies for the urinary bladder would be bacterial cystitis, sterile cystitis, and neoplasia.

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Further assessment would be urinalysis, urine culture, BRAF assay or catheter-assisted aspirate of the urinary bladder wall, FNA cytology of the liver, and endoscopy of both the upper and lower GI tract with biopsies.

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Specific therapy would be dependent on an etiological diagnosis.

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PATIENT IMAGES

Lola Gobin **Colon**

SPECIES

Canine

BREED

Springer spaniel

SEX

FS

AGE

11 years

WEIGHT

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Small intestine

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HOSPITAL NAME

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PATIENT

Liver

Lola Gobin

SPECIES

Canine

BREED

Springer spaniel

SEX

FS

AGE

11 years

WEIGHT

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HOSPITAL NAME

REFERRING VET

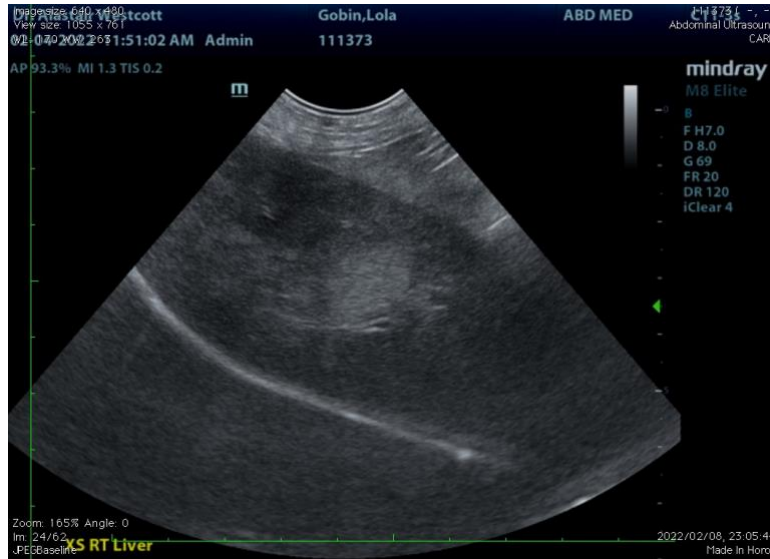
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Urinary bladder



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.

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