



**PATIENT PRESENTING CLINICAL SIGNS**

Izzy Kleckner History: Hyporexia, increased breathing effort.

**SPECIES** Physical Examination: N/A.

Canine Urinalysis: N/A

CBC: N/A.

**BREED** Serum Biochemistry: N/A.

Miniature Schnauzer Mix Radiographic Findings: Mid-abdominal mass.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

FS **Urinary System**

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

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

**WEIGHT** Normal iliac lymph nodes. Ureters not visualized.

15 # Normal renal size (left 5.1 cm, right 5.4 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  
N/A.

**Adrenal Glands**

**IMAGING PERFORMED BY** Normal position, echogenic appearance, shape, and size. Left 0.53/0.54 cm, right 0.56/0.6 cm.

Sonya Myers, DVM

**Spleen**

**HOSPITAL NAME** Normal size (1.4 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Lake Emma Animal Hospital

**REFERRING VET** **Liver**

Dr Groberg Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.3 cm).

**INVOICE** **Gastrointestinal**

303880

**DATE** Segmental thickening of the stomach (0.68 cm), duodenum (0.55 cm), and small intestine (jejunum (0.58 cm) with no loss of layering or distension of the lumen. Normal appearance and thickness of the ileo-cecal junction and colon (0.17 cm).

2/10/23


**PATIENT** *Pancreas*

Izzy Kleckner

Normal size (right 1.1 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES**
*Free Abdomen*

Canine

Mesenteric lymphadenomegaly (0.6 x 2.4 cm) with normal shape and echogenic appearance. Small amount of acellular ascites.

**BREED**

Miniature Schnauzer Mix

Mottled echogenic irregular solid mesenteric mass (3.9 x 5.9 cm) in the mid abdomen. FNA taken with no obvious post-aspirate hemorrhage.

**SEX**

FS

**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

**Age**

11 years

- Abdominal mass.
- Gastroenteropathy.
- Mesenteric lymphadenomegaly.
- Ascites.

**WEIGHT**

15 #

Secondary Findings:

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

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

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

**HOSPITAL NAME**

Lake Emma Animal  
Hospital

The most likely etiology for the lymph nodes would be reactive with lymphadenitis and infiltrative neoplasia, less likely differential diagnoses.

The ascites can be ascribed to the mass.

**REFERRING VET**

Dr Groberg

Further assessment needs to be based on the pending cytology results but could include fecal analysis, 3-view thoracic radiographs, and endoscopy of the upper GI tract, with biopsies. If surgical excision of the mass is being considered then full thickness biopsies of the GI tract and biopsy of the lymph nodes should be taken at the same time.

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Specific therapy would be dependent on an etiological diagnosis.

**DATE**

2/10/23



**PATIENT IMAGES**

Izzy Kleckner

**Mass**

**SPECIES**

Canine

**BREED**

Miniature Schnauzer Mix

**SEX**

FS

**Age**

11 years

**WEIGHT**

15 #

**INTERPRETED BY**

**Stomach**

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 MMedVet (Med), PhD, Dipl.  
 ECVIM

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Lake Emma Animal  
 Hospital

**REFERRING VET**

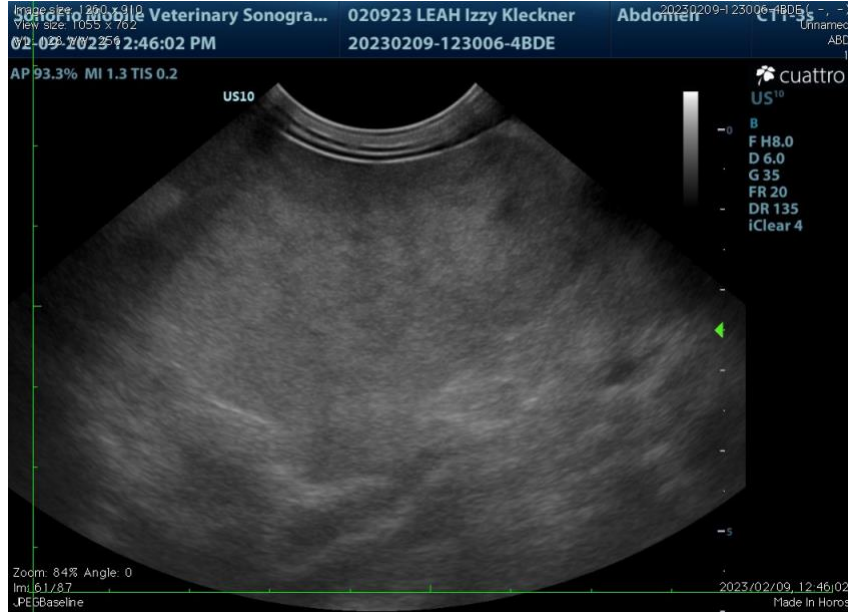
Dr Groberg

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**PATIENT Jejunum**

Izzy Kleckner

**SPECIES**

Canine

**BREED**

Miniature Schnauzer Mix

**SEX**

FS

**Age**

11 years

**WEIGHT**

15 #



**INTERPRETED BY**

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

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.

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
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**HOSPITAL NAME**

Lake Emma Animal  
 Hospital

**REFERRING VET**

Dr Groberg

**INVOICE**

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**DATE**

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