



**PATIENT PRESENTING CLINICAL SIGNS**

Motley Eylerts History: Elevated ALP, heart murmur.

**SPECIES** Physical Examination: Heart murmur.

Canine Urinalysis: N/A.

CBC: N/A.

**BREED** Serum Biochemistry: Elevated ALP activity.

Staffordshire terrier Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**MN** *Urinary System*

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

7 years Normal trigone area, proximal urethra (0.9 cm), and iliac blood vessels.

**WEIGHT** Normal iliac lymph nodes (2.9 cm). Ureters not visualized.

71 # Normal renal size (left 6.6 cm, right 6.8 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

**INTERPRETED BY** *Reproductive System*

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM Small hypoechoic prostate (1.3 cm).

*Adrenal Glands*

Normal shape, echogenic appearance, position, and size. Left 0.59/0.6 cm, right 0.66 cm.

*Spleen*

Normal size (2.3 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

*Liver*

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident.

*Gall bladder*

Full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal bile duct (0.3 cm).

**INVOICE**  
304044  
**DATE**  
3/23/23


**PATIENT** *Gastrointestinal*

Motley Eylerts

**SPECIES**

Canine

**BREED**

Staffordshire terrier

**SEX**

MN

**Age**

7 years

**WEIGHT**

71 #

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Banfield Oviedo

**REFERRING VET**

Dr Hinson

**INVOICE**

304044

**DATE**

3/23/23

Normal appearance of the stomach, duodenum, and ileo-cecal junction with no loss of layering, normal wall thickness (stomach 0.53 cm, duodenum 0.45 cm) and peristaltic activity, and no distension of the lumen. Segmental thickening of the small intestine (0.56 cm) and colon (0.53 cm) with no loss of layering or distention of the lumen.

**Pancreas**

Normal size (right 1.1 cm, left 0.9 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**Free Abdomen**

Mesenteric lymphadenomegaly (0.4 x 4.1 cm, 0.5 x 4.6 cm) with normal shape and echogenic appearance.

Focal hypoechoic mesenteric cyst (1 x 1.2 cm).

No ascites evident.

**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Enteropathy.
- Mesenteric lymphadenomegaly.

Secondary Findings:

- Mesenteric cyst.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the enteropathy would be non-specific enterocolitis (dietary indiscretion, toxins), parasitic, inflammatory bowel disease, dietary hypersensitivity, ulcerative disease, granulomatous disease, and emerging lymphoma.

Etiologies for the lymph nodes would be reactive and lymphadenitis, with infiltrative neoplasia, a likely differential diagnosis.

Further assessment would be fecal analysis, cobalamin assay, and endoscopy of both the upper and lower GI tract with biopsies. With the elevated ALP activity, FNA cytology of the liver can also be considered.

Specific therapy would be dependent on an etiological diagnosis.



**PATIENT**

Motley Eylerts

**SPECIES**

Canine

**BREED**

Staffordshire terrier

**SEX**

MN

**Age**

7 years

**WEIGHT**

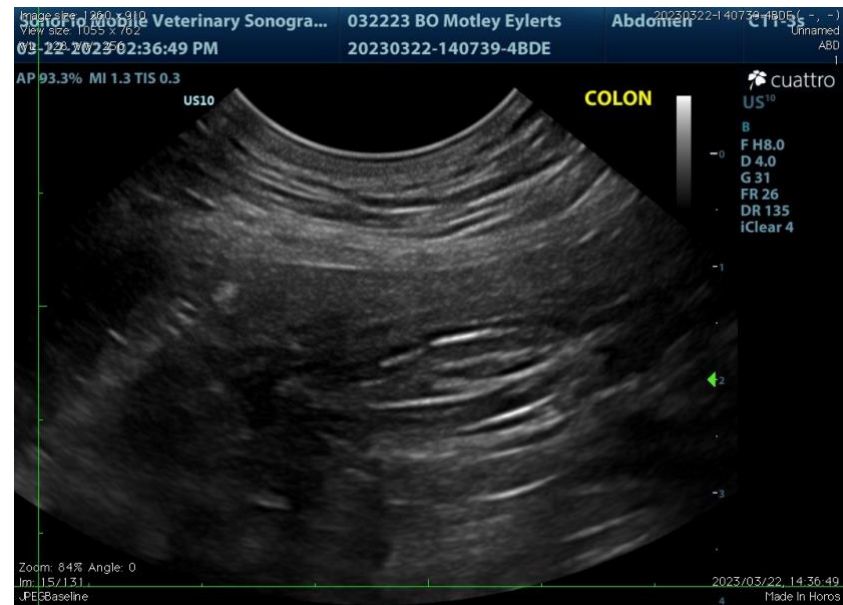
71 #

**IMAGES**

**Jejunum**



**Colon**



**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Banfield Oviedo

**REFERRING VET**

Dr Hinson

**INVOICE**

304044

**DATE**

3/23/23



**PATIENT** Mesenteric lymph node

Motley Eylerts

**SPECIES**

Canine

**BREED**

Staffordshire terrier

**SEX**

MN

**Age**

7 years

**WEIGHT**

71 #



**Cyst**

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Banfield Oviedo

**REFERRING VET**

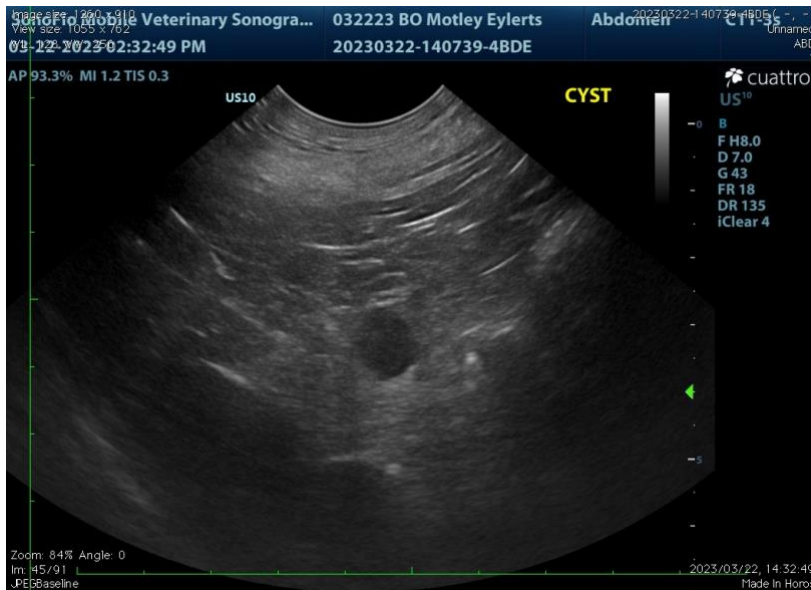
Dr Hinson

**INVOICE**

304044

**DATE**

3/23/23



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)**  
[rlobetti@mweb.co.za](mailto:rlobetti@mweb.co.za)