

PATIENT PRESENTING CLINICAL SIGNS

Channel Cordova History: Acute onset abdominal pain/discomfort – treated with meloxicam. Developed vomiting and hemorrhage diarrhea – treated symptomatically.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

BREED CBC: N/A.

Miniature Poodle Serum Biochemistry: Mildly elevated ALP activity.

Radiographic Findings: N/A.

SEX

Female

AGE

2 years

WEIGHT

4.68 #

INTERPRETED BY

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

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness (0.1 cm) 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 (0.2 and 0.4 cm). Ureters not visualized.

Normal renal size (left 3.5 cm, 3.7 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

Reproductive System

Normal appearance of the uterus (0.6 cm).

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.44 cm, right 0.45 cm

Spleen

Normal size (0.7 cm) 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 normal anechoic bile. Normal thickness (0.1 cm) but with a hyperechogenic appearance of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.2 cm, duodenum 0.43 cm, jejunum 0.31 cm, colon 0.12 cm) and peristaltic activity and no distension of the lumen. Fluid accumulation within the stomach and colon.

IMAGING PERFORMED BY

Dr Gabriel Ferrer, DVM

HOSPITAL NAME

Paseos Veterinary Center

REFERRING VET

Dr Jose Vientos, DVM

INVOICE

302856

DATE

4/1/22



PATIENT *Pancreas*

Channel Cordova Normal size (right 0.9 cm, left 0.7 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine Normal mesenteric lymph nodes (0.3 x 1.2 cm).
No ascites.

BREED **ULTRASONOGRAPHIC FINDINGS**

Miniature Poodle

SEX Primary Findings:
• Gastro-enteropathy?

Female Secondary Findings:

AGE • Hyperechogenic gall bladder wall.
2 years

WEIGHT **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

4.68 # The fluid filled stomach and colon would be indicative of gastro-enteritis, with the most likely etiology being secondary to the meloxicam therapy. Other etiologies would be infectious (viral, bacterial, protozoal), helminths, dietary hypersensitivity, and toxins.

INTERPRETED BY The appearance of the gall bladder wall is most likely from a previous episode of cholecystitis.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM Further assessment would be fecal analysis.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be intestinal diet, anti-emetics, and intestinal absorbents/protectants.

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PATIENT

Channel Cordova

SPECIES

Canine

BREED

Miniature Poodle

SEX

Female

AGE

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IMAGES

Gall bladder



Stomach





PATIENT Colon

Channel Cordova

SPECIES

Canine

BREED

Miniature Poodle

SEX

Female

AGE

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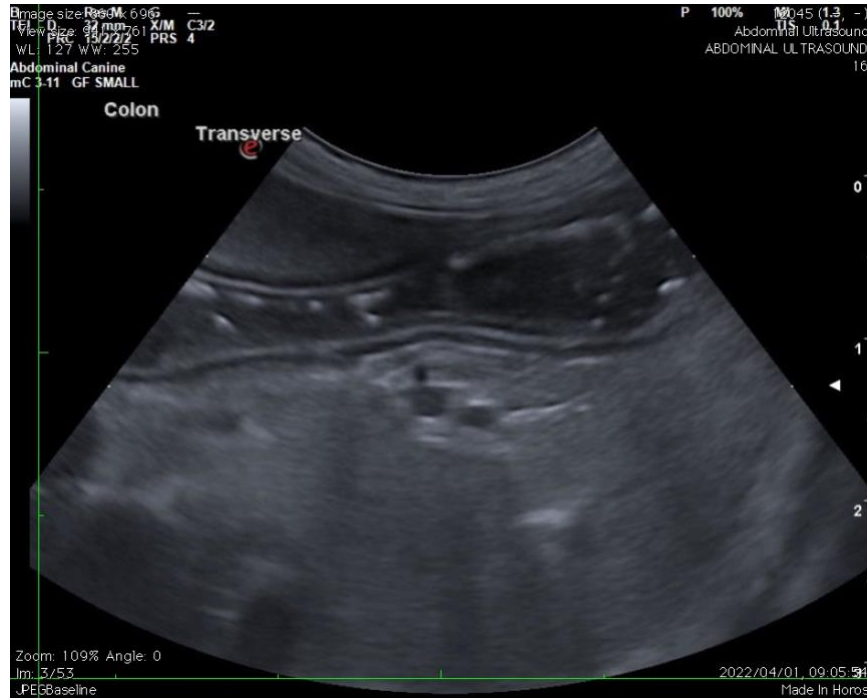
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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