


PATIENT PRESENTING CLINICAL SIGNS

Cooper Nivelos History: Dribbling urine, urolith vs prostatic mineralization. Previous history of PSS corrected with an ameroid constrictor.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

BREED CBC: N/A.

Yorkshire terrier Serum Biochemistry: N/A.

Radiographic Findings: N/A.

SEX

MN

Age

5 years

WEIGHT

4 #

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment evident. Small urolith (0.7 x 0.8 cm) originally present in the prostatic urethra, which was subsequently retro-pulsed into the urinary bladder. Urinary catheter visible.

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

Normal iliac lymph nodes (1 cm). Ureters not visualized.

Normal renal size (left 3.3 cm, right 3.7 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule. Mineralized areas with the cortex of the left kidney, small non-obstructive renoliths in the right kidney.

Reproductive System

N/A.

Adrenal Glands

Normal position, echogenic appearance, and shape but enlarged. Left 0.4/0.3 cm, right 0.44/0.44 cm.

Spleen

Normal size (1 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. Mottled echogenic parenchymal nodule (0.6 x 0.9 cm) in the head of the spleen with no bulging of the overlying capsule.

Liver

Small in size with normal echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident.

Gall bladder

Full containing small amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the wall. Normal bile duct (0.1 cm).

INTERPRETED BY

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ECVIM

IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

Oviedo Veterinary Care and
Emergency

REFERRING VET

Dr Williams

INVOICE

304105

DATE

4/11/23


PATIENT
Gastrointestinal

Cooper Nivelos

Normal appearance of the stomach, duodenum, small intestine, and colon with no loss of layering, normal wall thickness (stomach 0.24 cm, duodenum 0.3 cm, jejunum 0.35 cm, colon 0.16 cm) and peristalsis, and no distension of the lumen.

SPECIES

Canine

Pancreas
BREED

Yorkshire terrier

Normal size (left 0.8 cm, right 0.4 cm) and echogenic appearance, Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SEX

Normal mesenteric lymph nodes (0.8 cm).
No ascites evident.

MN
Age

5 years

Free Abdomen
ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Urolith.
- Splenic nodule.

WEIGHT

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Secondary Findings:

- Gall bladder sediment.
- Micro-hepatica.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenic nodule would be hyperplasia, hematoma, granuloma, abscess, and neoplasia.

The micro-hepatica is in line the previous diagnoses of PSS but would have expected it to have normalized post ameroid constrictor, which could imply either incomplete occlusion or concurrent primary portal vein hypoplasia.

Further assessment would be bile acids and cystotomy, which will also allow for wedge biopsy of the liver and biopsy/excision of the splenic nodule.

Specific therapy would be dependent on an etiological diagnosis.

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PATIENT IMAGES

Cooper Nivelos

Prostatic urethra

SPECIES

Canine

BREED

Yorkshire terrier

SEX

MN

Age

5 years

WEIGHT

4 #



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Urinary bladder post catheterization and flush

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PATIENT Liver

Cooper Nivelos

SPECIES

Canine

BREED

Yorkshire terrier

SEX

MN

Age

5 years

WEIGHT

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Spleen

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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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