



PATIENT

Stella Li

SPECIES

Canine

BREED

Pitbull Mx

SEX

FS

AGE

9 years

WEIGHT

38 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Village Royale Animal
Clinic

REFERRING VET

Dr McIntire

INVOICE

304110

DATE

4/12/23

PRESENTING CLINICAL SIGNS

History: Vomiting.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

Radiographic Findings: N/A.

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 or uroliths evident.

Normal trigone area, proximal urethra (0.2 cm), and iliac blood vessels.

Large irregular mottled echogenic mass in the area of the iliac lymph nodes that surrounds the regional blood vessels. Hyperechogenic appearance of the surrounding mesentery.

Ureters not visualized.

Normal renal size (left 5.5 cm, right 5.9 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

Adrenal Glands

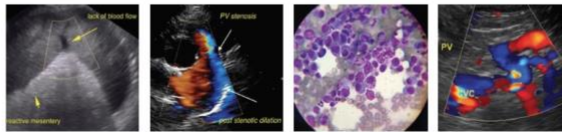
Normal echogenic appearance, position, shape, and size. Left 0.66 cm, right 0.58 cm.

Spleen

Normal size with mottled echogenic and nodular appearance. Nodules are faint, parenchymal, hypoechoic, and up to 0.5 cm in size. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature.

Liver

Normal size with a coarse echogenic and nodular appearance, normal portal markings, and regular curvilinear capsule. Nodules are faint, parenchymal, and hypoechoic. No masses evident.



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Gall bladder

Full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal bile duct.

Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.32 cm, jejunum 0.39 cm) and peristaltic activity, and no distension of the lumen. Focal thickening of the duodenum (0.71 cm) with loss of layering but no distension of the lumen.

Pancreas

Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.
Multiple hypoechogenic nodules within the caudal mesentery.
No ascites evident.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Iliac mass.
- Mesenteric nodules.
- Focal duodenal pathology.
- Nodular hepatopathy.
- Splenic pathology.

Secondary findings:

- None.

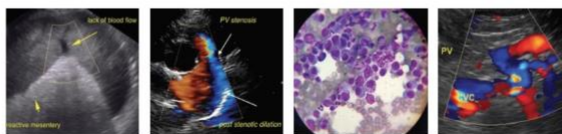
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS IMAGES

Likely etiologies for the iliac mass and mesenteric nodules would be neoplasia and granulomatous disease.

Etiologies for the duodenum would be neoplasia, severe focal duodenitis, granulomatous enteritis, and focal perforation.

Etiologies for the liver would be an incidental age-related change, reactive, nodular hyperplasia, vacuolar, and chronic hepatitis with neoplasia, an unlikely differential diagnosis.

Etiologies for the spleen would be splenitis, and infiltrative neoplasia.



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Further assessment would be FNA cytology of the iliac mass, mesenteric nodules, and liver and possibly endoscopy of the upper GI tract with biopsies. If surgery is been considered then CT scan of the thorax and abdomen would be recommended.

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Specific therapy would be dependent on an etiological diagnosis.

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IMAGES

Iliac lymph node area

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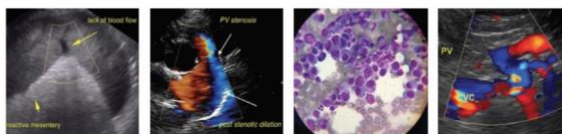
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Duodenum



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Spleen



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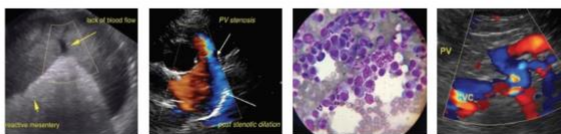
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PATIENT **Liver**

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Caudal abdomen



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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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 rlobetti@mweb.co.za