

PATIENT

Lulu Joiner

SPECIES

Canine

BREED

Golden retriever mix

SEX

Female

AGE

WEIGHT

24 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Brent Crutchfield,
DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Dr Cail

INVOICE

302919

DATE

4/20/22

PRESENTING CLINICAL SIGNS

History: Vomiting past 3 days, anorexia, lethargic. Tends to eat toys.

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 appearance and thickness 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. Ureters not visualized.

Normal renal size (left 6.7 cm, right 4.8 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

Normal appearance of the uterus and ovaries (right ovary 1.4 cm).

Adrenal Glands

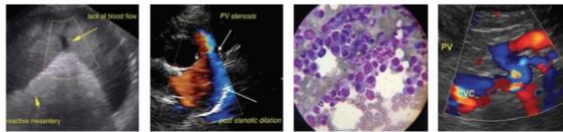
Normal shape, echogenic appearance, size, and position. Left 0.53 cm, right 0.45 cm.

Spleen

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

Liver

Normal size, echogenic appearance, and markings. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder. Normal bile duct.



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.52 cm, colon 0.19 cm) and peristalsis, and no distension of the lumen. Focal thickening of the jejunum (0.71 cm) with the rest of the small intestine appearing normal. Fluid within the colon.

Pancreas

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

Free Abdomen

Mesenteric lymphadenomegaly with normal shape and echogenic appearance.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Focal jejunal thickening.
- Lymphadenomegaly.

Secondary findings:

- None.

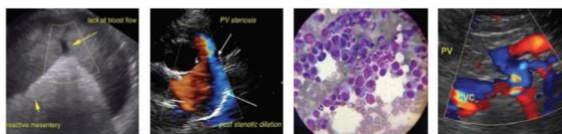
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the focal jejunal thickening would be secondary to a passing foreign body, necrotic enteritis, parasitic enteritis, granulomatous reaction, and emerging neoplasia.

The most likely etiology for the lymphadenomegaly would be reactive secondary to the jejunal pathology with lymphadenitis a differential diagnosis and infiltrative neoplasia a far less likely differential diagnosis.

Further assessment would be fecal analysis and FNA cytology of the lymph nodes and jejunum. Follow up ultrasound within 18-24 hours would be recommended to ensure that there is no foreign body. Laparotomy with biopsy/resection of the jejunal thickening may also be required.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be intestinal diet, anti-emetics, and a course of fenbendazole and/or metronidazole.



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IMAGES

Jejunum



Lymph nodes



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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.

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