

PATIENT

Oreo Coward

SPECIES

Canine

BREED

Pitbull terrier

SEX

MN

AGE

15 years

WEIGHT

68 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Michelle Roche

HOSPITAL NAME

Fredon Animal
Hospital

REFERRING VET

Michelle Roche

INVOICE

304076

DATE

4/4/23

PRESENTING CLINICAL SIGNS

History: Falling over, hyporexia, weight loss.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: Mild anemia.

Serum Biochemistry: Elevated ALT and ALP activity.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Small hyperechogenic nodule on the apical wall. Small amount of floating hyperechogenic sediment present. No uroliths evident.

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 7.9 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal blood flow, pelvis, and capsule.

Reproductive System

Small hypoechogenic prostate.

Adrenal Glands

Normal shape, echogenic appearance, position, and size.

Spleen

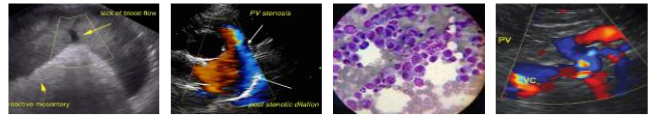
Normal size with a mottled echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes evident.

Liver

Normal size with a hyperechogenic and nodular appearance, some loss of portal markings, and regular curvilinear capsule. Nodules are faint, parenchymal and hypoechogenic. No masses evident.

Gall bladder

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



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Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristalsis, and 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

No mesenteric lymphadenomegaly.
No ascites evident.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Nodular hepatopathy.
- Splenic pathology.

Secondary findings:

- Urinary bladder nodule.
- Age-related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the nodular hepatopathy would be reactive, nodular hyperplasia, granulomatous disease, chronic hepatitis, and infiltrative neoplasia.

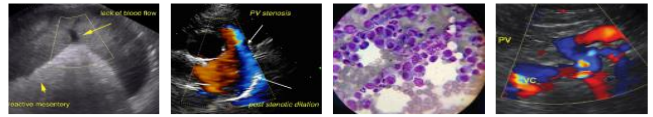
Etiologies for the spleen would be reactive, extra-medullary hematopoiesis, splenitis, and infiltrative neoplasia.

Although the urinary bladder nodule is most likely an incidental finding, emerging neoplasia needs to be considered.

With the presenting sign of falling over, primary neurological and cardiac disease needs to be considered.

Further assessment would be urinalysis, urine culture, neurological examination, survey thoracic radiographs, and FNA cytology of the spleen and liver.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management of the liver would be ursodiol.



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IMAGES

Liver



Spleen



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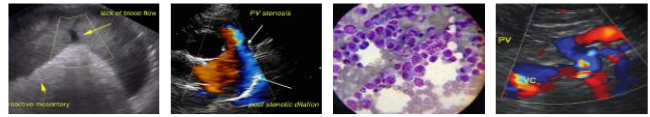
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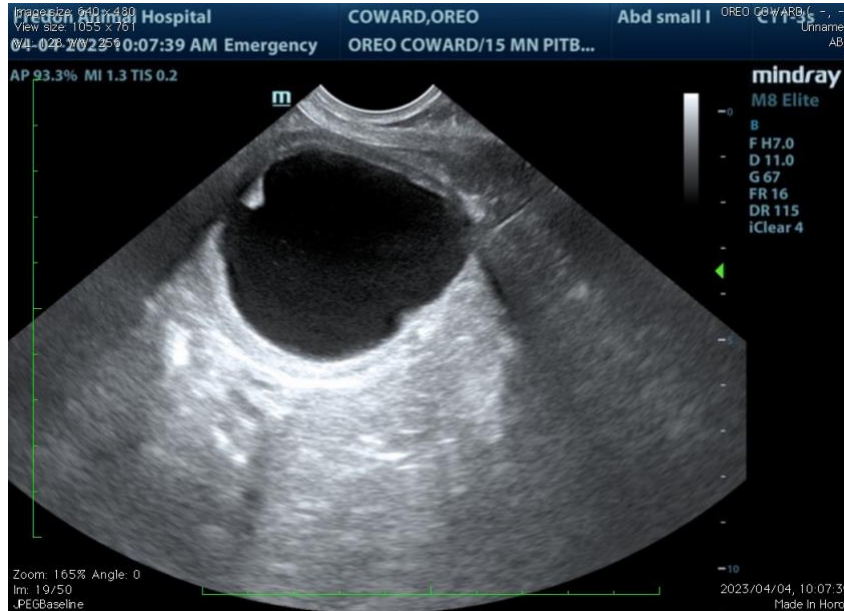
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Urinary bladder



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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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