



**PATIENT PRESENTING CLINICAL SIGNS**

**Coco Carrasquillo** History: Weight loss. lethargic.

**SPECIES** Physical Examination: Pendulous abdomen and palpable mass in the mid-abdomen.

Canine Urinalysis: N/A.

**BREED** CBC: Thrombocytosis.

Chihuahua Mix Serum Biochemistry: Elevated urea.

Radiographic Findings: Cranial abdominal mass.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Intact Female

**AGE**

13 years

**WEIGHT**

13.3 #

**INTERPRETED BY**

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

**Urinary System**

Full urinary bladder with a normal thickness (0.7 cm) and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

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

Prominent iliac lymph nodes. Ureters not visualized.

Left kidney – small (1.9 cm) and irregular with complete loss of cortico-medullary differentiation.

Enlarged right kidney (5.5 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and regular capsule. Pyelectasia (0.4 cm).

**Reproductive System**

Small amount of fluid accumulation within the uterine body (1.3 cm).

**Adrenal Glands**

Normal shape, echogenic appearance, size, and position. Left 0.49 cm, right 0.57 cm. Mild mineralization within the right adrenal gland.

**Spleen**

Normal size and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. Large mottled mass (4.4 x 6.6 cm) in the tail of the spleen.

**Liver**

Normal size, echogenic appearance, and portal markings. Two parenchymal nodules – one hypoechoic (0.37 cm) and the other hyperechoic (1.3 cm). Full gall bladder containing normal anechoic bile. Normal thickness (0.1 cm) and echogenic appearance of the gall bladder wall. Normal bile duct.

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary Center

**REFERRING VET**

Dr Ricardo Carrasquillo

**INVOICE**

302866

**DATE**

4/6/22



**PATIENT** *Gastrointestinal*

Coco Carrasquillo Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.34 cm, duodenum 0.6 cm, jejunum 0.55 cm, colon 0.17 cm) and peristaltic activity and no distension of the lumen. Fluid accumulation within the stomach and colon.

**SPECIES**

Canine

**BREED**

Chihuahua Mix

*Pancreas*

Normal size (right 1.4 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

*Free Abdomen*

**SEX**

Intact Female

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

**AGE**

13 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

13.3 #

Primary Findings:

- Splenic mass.
- Hepatic nodules.
- Renal changes.

**INTERPRETED BY**

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

Secondary Findings:

- Mucometra.
- Adrenal mineralization.

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The most likely etiology for the splenic mass would be neoplasia with granuloma and organized hematoma, differential diagnoses.

**HOSPITAL NAME**

Paseos Veterinary Center

As the appearance of the hepatic nodules are different to that of the splenic mass, it is unlikely that they are metastatic foci and most likely age-related nodular changes.

**REFERRING VET**

Dr Ricardo Carrasquillo

Etiologies for the left kidney would be a congenital anomaly and previous bacterial nephritis, trauma, or obstruction. The right renomegaly would be a compensatory reaction but with present changes compatible with early kidney disease with bacterial nephritis and pyelectasia differential diagnoses.

**INVOICE**

302866

The appearance of the uterus and right adrenal gland can both be considered age related changes.

**DATE**

4/6/22

The prominent iliac lymph nodes can be considered reactive.

Further assessment would be urinalysis, urine culture, 3-view thoracic radiographs, and FNA cytology of the splenic mass and hepatic nodule. Laparotomy can also be considered, which could be both diagnostic and therapeutic.

Specific therapy would be dependent on an etiological diagnosis.



**PATIENT**

Coco Carrasquillo

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

Intact Female

**AGE**

13 years

**WEIGHT**

13.3 #

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary Center

**REFERRING VET**

Dr Ricardo Carrasquillo

**INVOICE**

302866

**DATE**

4/6/22

**IMAGES**

**Liver**



**Spleen**





**PATIENT**

Coco Carrasquillo

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

Intact Female

**AGE**

13 years

**WEIGHT**

13.3 #

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary Center

**REFERRING VET**

Dr Ricardo Carrasquillo

**INVOICE**

302866

**DATE**

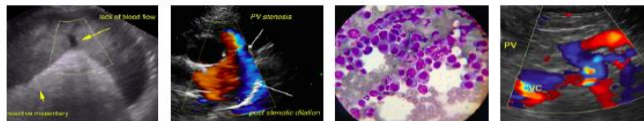
4/6/22

**Left kidney**



**Right kidney**





**PATIENT Uterus**

Coco Carrasquillo

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

Intact Female

**AGE**

13 years

**WEIGHT**

13.3 #

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary Center

**REFERRING VET**

Dr Ricardo Carrasquillo

**INVOICE**

302866

**DATE**

4/6/22



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)**  
[rlobetti@mweb.co.za](mailto:rlobetti@mweb.co.za)