



**PATIENT PRESENTING CLINICAL SIGNS**

**Luci Miscisin** History: Chronic vomiting with acute onset hematemesis, diarrhea and lethargy. Some improvement with symptomatic therapy but ongoing lethargy and anorexia.

**SPECIES**

Physical Examination: Dehydration, diarrhea.

Canine

Urinalysis: N/A.

**BREED**

CBC: Hemoconcentration.

Labrador Mix

Serum Biochemistry: Elevated ALP activity.

Radiographic Findings: N/A.

**SEX**

FS

**AGE**

6 years

**WEIGHT**

47.5 #

**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, echogenic appearance, cortico-medullary differentiation, capsule and pelvis.

**Adrenal Glands**

Normal shape, echogenic appearance, size, and position. Left 0.55 cm.

**Spleen**

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

**Liver**

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

**Gastrointestinal**

Normal appearance of the stomach, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Prominent appearance of the submucosal layer of the small intestine with no loss of layering and faint mucosal stippling. Ingesta with the stomach and small intestine, fecal material within the colon.

**Pancreas**

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

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Ukachi Ugorji, DVM

**HOSPITAL NAME**

Craig Road Animal  
Hospital

**REFERRING VET**

Dr Ukachi Ugorji, DVM

**INVOICE**

302959

**DATE**

5/12/22



**PATIENT** *Free Abdomen*

Luci Miscisin  
No mesenteric lymphadenomegaly.  
No ascites.

**SPECIES**

Canine

**BREED**

Labrador Mix

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**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Enteropathy.

Secondary Findings:

- None.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the enteropathy would be non-specific enteritis (dietary indiscretion, bacterial helminths, protozoal, toxins), inflammatory bowel disease, and dietary hypersensitivity.

Further assessment would be fecal analysis, cobalamin assay, and possibly endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be fluid therapy for the dehydration, novel protein/hypoallergenic diet, course of fenbendazole and/or metronidazole, gastric protectants (omeprazole, sucralfate), and anti-emetics.



**PATIENT IMAGES**

Luci Miscisin **Small intestine**

**SPECIES**

Canine

**BREED**

Labrador Mix

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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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