

PATIENT

Fenway Braio

SPECIES

Canine

BREED

Mixed breed

SEX

MN

AGE

8 years

WEIGHT

27.1 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

302964

DATE

5/16/22

PRESENTING CLINICAL SIGNS

History: Episode or urinary and bowel incontinence, normal prior to that.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: Leukocytosis, hemoconcentration.

Serum Biochemistry: Elevated proteins, liver enzyme activity, creatinine, phosphate, and potassium.

Radiographic Findings: Ascites.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Small urinary bladder a normal thickness (0.3 cm) and appearance 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 cm, right 5.4 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

Small hypoechoic prostate (0.9cm).

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.63 cm, right 0.58 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 portal markings. No nodules or masses evident. Distended gall bladder containing small amount of hyperechogenic non-adherent sediment. Normal thickness (0.2 cm) and appearance of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.4 cm, duodenum 0.31 cm, jejunum 0.42 cm, colon 0,22 cm) 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.

Moderate amount of cellular ascites.

Hyperechogenic appearance and nodular appearance of the mesentery.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Peritonitis

Secondary findings:

- Gall bladder sediment.

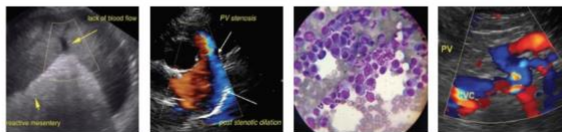
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the appearance of the mesentery and ascites would be peritonitis (sterile, bacterial, urine, bile) and carcinomatosis.

The appearance of the gall bladder is most likely an incidental finding as there does not appear to be any obstruction of the bile duct or cholecystitis.

Further assessment would be 3-view thoracic radiographs, analysis of the ascitic fluid, and possibly FNA cytology of the mesentery. With the serum biochemical changes running urea and creatinine on the ascitic fluid would be recommended.

Specific therapy would be dependent on an etiological diagnosis



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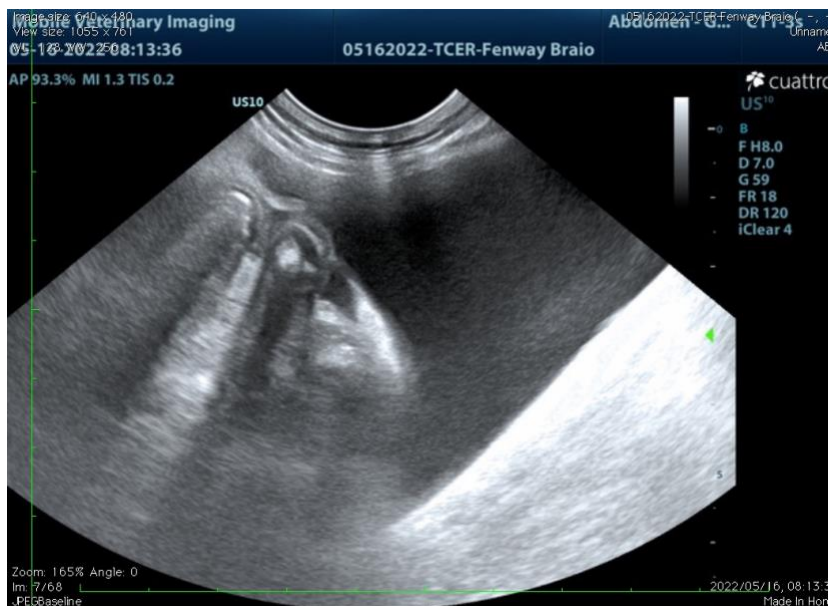
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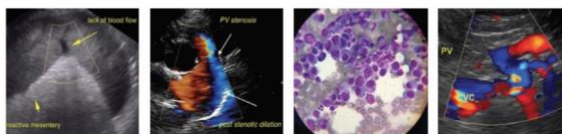
IMAGES

Ascites



Mesentery





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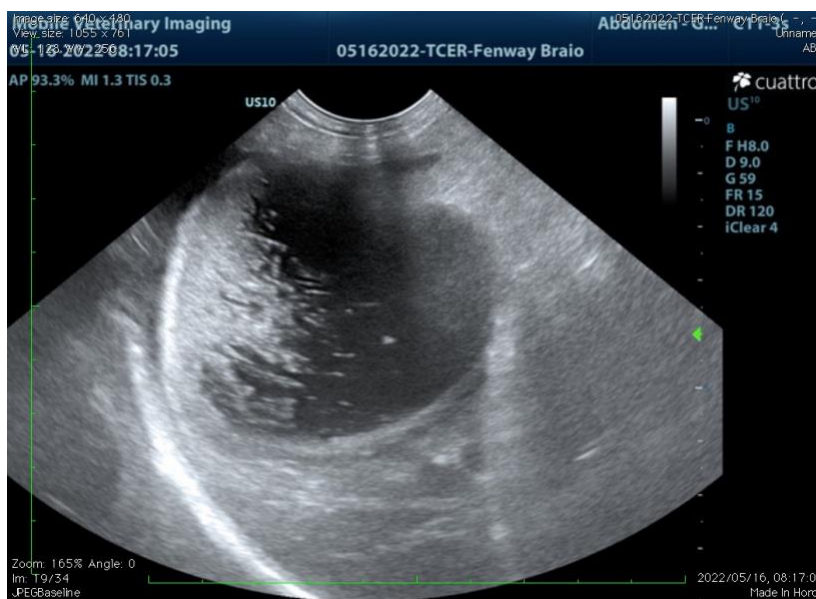
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Gall bladder



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