



PATIENT PRESENTING CLINICAL SIGNS

Torres Agrait Max History: Generalized weakness, depression and anorexia. Recent blood transfusion.
Physical Examination: N/A.

SPECIES Urinalysis: SG 1.046, crystals.

Canine CBC: Anemia, thrombocytopenia.

BREED Serum Biochemistry: Hypoproteinemia, mildly elevated SDMA, negative 4Dx.

Miniature Schnauzer Radiographic Findings: Rounded appearance of the liver, spondylosis.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

MN **Urinary System**

AGE Full urinary bladder with a normal thickness (0.2 cm) and appearance of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

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

WEIGHT Normal iliac lymph nodes (right 0.7, left 0.6 cm). Ureters not visualized.

17 # Normal renal size (left 4.4 cm, right 4.7 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

INTERPRETED BY **Reproductive System**

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM Small hypoechogenic prostate (1.2 cm).

IMAGING PERFORMED BY **Adrenal Glands**
Normal shape, echogenic appearance, position, and size. Left 0.39 cm, right 0.38 cm.

Dr Gabriel Ferrer, DVM **Spleen**

HOSPITAL NAME Enlarged (1.9 cm) and irregular with a diffuse mottled echogenic appearance. Multiple irregular hyperechogenic parenchymal nodules of varying sizes.

Paseos Veterinary Center **Liver**

REFERRING VET Enlarged with a mottled echogenic appearance, and loss of portal markings. Multiple irregular hyperechogenic parenchymal nodules of varying sizes. Small gall bladder containing normal anechoic bile. Normal thickness (0.3 cm) and echogenic appearance of the gall bladder wall. Normal bile duct.

INVOICE **Gastrointestinal**
302945

DATE Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.3 cm, duodenum 0.43 cm, jejunum 0.35 cm, colon 0.14 cm) and peristaltic activity and no distension of the lumen.

5/9/22



PATIENT *Pancreas*

Torres Agrait Max Normal size (left 1.2 cm, right 1.4 cm) and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine No mesenteric lymphadenomegaly.
Small amount of ascites.

BREED

Miniature Schnauzer

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

SEX

- Nodular hepatopathy.
- Nodular splenomegaly.
- Ascites.

MN

AGE

13 years

Secondary Findings:

- Urinary bladder sediment.

WEIGHT

17 #

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

As the appearance of the liver and spleen are similar, the two most likely etiologies would be neoplasia and granulomatous disease with secondary ascites – either hemorrhage or modified transudate. Secondary immune-mediated hemolytic anemia and thrombocytopenia (Evan’s syndrome) is also most likely, rather than being a primary disease.

Further assessment would be Coombs’ test, 3-view thoracic radiographs, and ideally FNA cytology of the spleen and liver and analysis of the ascitic fluid.

Specific therapy would be dependent on an etiological diagnosis. Management of the Evan’s syndrome would be immune-suppressive therapy and blood transfusions as needed.

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 Jennifer Walker

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PATIENT

Torres Agrait Max

IMAGES

Liver

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

MN

AGE

13 years

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17 #

Spleen

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Dr Jennifer Walker



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

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