

PATIENT

Riley Kessler

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

12 years

WEIGHT

18.7 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne
Animal Hospital

REFERRING VET

Dr Boazman

INVOICE

303117

DATE

7/12/22

PRESENTING CLINICAL SIGNS

History: Geriatric screening for anesthetic for dental. Diabetic, vomiting episodes past 3 months, intermittent hypoglycemia episodes.

Physical Examination: Chronic bilateral cataracts, thin body condition, severe periodontal disease.

Urinalysis: Pending.

CBC: Pending.

Serum Biochemistry: Pending.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

Normal trigone area, proximal urethra (0.4 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.5 cm, right 5.4 cm) with increased, echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

N/A.

Adrenal Glands

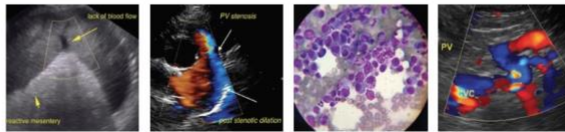
Normal shape, echogenic appearance, position, and size. Left 0.54 cm, right 0.48 cm.

Spleen

Normal size (1.4 cm) 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 nodules or masses evident. Full gall bladder containing moderate amount of hyperechogenic sediment. Normal thickness and appearance of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the stomach, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.47 cm) and peristaltic activity, and no distension of the lumen. Thickening of the duodenum (0.55 cm) and small intestine (0.42 cm) with no loss of layering or distension of the lumen. Ingesta within the stomach.

Pancreas

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

Free Abdomen

Mesenteric (up to 0.6 x 3.5 cm), gastric (1 cm), and hepatic (1.6 cm) lymphadenomegaly with normal shape and echogenic appearance.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Enteropathy.
- Mesenteric lymphadenomegaly.
- Age-related renal changes vs chronic kidney disease.

Secondary findings:

- Gall bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the enteropathy would be inflammatory bowel disease, parasitic enteritis, granulomatous enteritis, and dietary hypersensitivity.

The most likely etiology for the lymphadenomegaly would be reactive with lymphadenitis and infiltrative neoplasia, less likely differential diagnoses.

Although the gall bladder sediment is most likely an incidental finding monitoring for the development of a mucocele would be indicated.

Further assessment/therapy needs to be based on the pending results.

Supportive management of the gall bladder would be ursodiol.



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IMAGES

Duodenum



Mesenteric lymph node



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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)
 rlobetti@mweb.co.za