

PATIENT

Gucci Smilovici

SPECIES

Canine

BREED

Chihuahua

SEX

MN

AGE

12 years

WEIGHT

12.6 #

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

303186

DATE

8/11/22

PRESENTING CLINICAL SIGNS

History: Heart murmur assessment.

Physical Examination: Grade IV/VI heart murmur.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: Mildly elevated liver enzyme activity.

Radiographic Findings: Suspected splenic mass, hepatomegaly.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and echogenic appearance of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3.9 cm, right 4.2 cm) with increased, echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

Small hypoechogenic prostate (0.7 cm).

Adrenal Glands

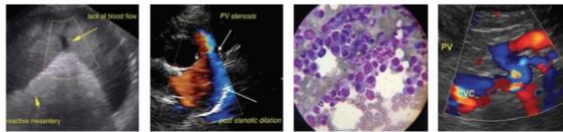
Normal shape, echogenic appearance, and position but plump in size, especially the left. Left 0.72 cm, right 0.66 cm.

Spleen

Normal size and echogenic appearance. Two mottled echogenic vascularized parenchymal masses (1.2 x 1.4 cm, 3.3 x 3.9 cm) with bulging of the overlying capsule. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature.

Liver

Normal size with a diffuse increased and nodular echogenic appearance, some loss of portal markings, and regular curvilinear capsule. Nodules are hypoechogenic, parenchymal and up to 0.9 x 1.2 cm in size. No masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.1 cm).



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Gastrointestinal

Normal appearance of the stomach, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.26 cm, jejunum 0.3 cm) and peristaltic activity, and no distension of the lumen. Normal thickness of the duodenum (0.42 cm) with mucosal stippling but no loss of layering or distension of the lumen.

Pancreas

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

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Splenic masses.
- Nodular hepatopathy.
- Adrenomegaly
- Enteropathy?

Secondary findings:

- Age-related renal changes.
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenic masses would be neoplasia, granulomas, and hematomas.

Etiologies for the liver would be reactive, vacuolar, metabolic, chronic hepatitis, nodular regeneration, early cirrhosis, granulomatous disease, and infiltrative neoplasia.

Although the appearance of the duodenum may be an incidental finding, primary lymphangectasia, inflammatory bowel disease, parasitic enteritis, granulomatous enteritis, and dietary hypersensitivity needs to be considered.

The most likely etiology for the adrenal glands would be disease stress with emerging Cushing's disease a differential diagnosis.

Further assessment would be urine and fecal analyses and FNA cytology of the splenic masses and liver. Adrenal function testing and endoscopy of the upper GI tract should be considered, if there are compatible clinical signs.

Specific therapy would be dependent on an etiological diagnosis.

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IMAGES

Liver



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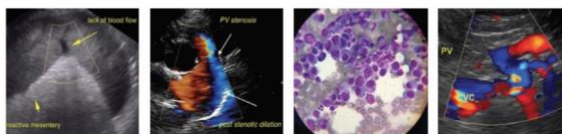
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Spleen



Duodenum



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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