



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Meesha Johnston History: Acute onset GI tract disease 2 weeks ago – responded to symptomatic therapy. Elevated liver enzymes on re-assessment.

SPECIES Canine Physical Examination: N/A.

Urinalysis: N/A.

BREED CBC: Mildly elevated RCC and reticulocytes.

Mi-KI Serum Biochemistry: Mildly elevated ALT and GGT activity and bilirubin.

Radiographic Findings: N/A.

SEX

FS

AGE

11 years

WEIGHT

6.5 #

INTERPRETED BY

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

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with normal thickness 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 3.2 cm, right 3.3 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal blood flow, pelvis, and capsule.

Reproductive System

Small hypoechogenic prostate.

Adrenal Glands

Left adrenal – normal shape, echogenic appearance, position, and size (0.43/0.41 cm).

Right adrenal – normal shape, echogenic appearance, position, and size (0.4 cm). Hyperechogenic nodule (0.85 cm) in the cranial pole.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular 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 small amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

INVOICE

303164

DATE

8/4/22

IMAGING PERFORMED BY

Dr Jack Reese DVM

HOSPITAL NAME

Willow Run Veterinary
Clinic

REFERRING VET

Dr Jack Reese VMD



PATIENT *Gastrointestinal*

Meesha Johnston Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Prominent hypoechoic appearance of the submucosal layer of the small intestine with no thickening, loss of layering, or distension of the lumen.

SPECIES

Canine

Pancreas

BREED

Mi-KI

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

SEX

FS

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

AGE

11 years

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

WEIGHT

6.5 #

- Right adrenal nodule.
- Enteropathy.

Secondary Findings:

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

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Dr Jack Reese DVM

Etiologies for the right adrenal nodule would be incidental finding, non-functional adenoma, and emerging functional adenoma/carcinoma.

HOSPITAL NAME

Willow Run Veterinary
Clinic

The most likely etiology for the appearance of the small intestine would be from the recent episode of GI tract disease, with inflammatory bowel disease, dietary hypersensitivity, and parasitic enteritis (helminths, protozoa) differential diagnoses.

REFERRING VET

Dr Jack Reese VMD

Further assessment that would be considered would be fecal analysis, cobalamin assay, and possibly endoscopy of the upper GI tract with biopsies (if the history is compatible with chronic GI issues) and adrenal function testing (if there are compatible clinical signs).

Regular ultrasound monitoring of the right adrenal gland would be recommended.

INVOICE

303164

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management of the gall bladder and liver would be ursodiol.

DATE

8/4/22



PATIENT IMAGES

Meesha Johnston **Right adrenal**

SPECIES

Canine

BREED

Mi-KI

SEX

FS

AGE

11 years

WEIGHT

6.5 #

Small intestine

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Jack Reese DVM

HOSPITAL NAME

Willow Run Veterinary
Clinic

REFERRING VET

Dr Jack Reese VMD

INVOICE

303164

DATE

8/4/22



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