



**PATIENT PRESENTING CLINICAL SIGNS**

**Mocha Talley** History: Dull/moribund, recumbent. Seizure like activity. Necrotizing pancreatitis suspected on recent in-house ultrasound.

**SPECIES** Physical Examination: Hypothermic and cold extremities, swelling of the right hindlimb.

Canine Urinalysis: N/A.

**BREED** CBC: N/A.

Mixed Serum Biochemistry: Hypoglycemia, elevated creatinine, ALT activity, and amylase.

Radiographic Findings: N/A.

**SEX**

FS

**Age**

5 years

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

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

**WEIGHT**

77 #

Normal trigone area, proximal urethra (0.5 cm), and iliac blood vessels.

Enlarged iliac lymph nodes (1 x 3.1 cm, 0.9 x 4.7 cm) with a normal shape and echogenic appearance. Ureters not visualized.

**INTERPRETED BY**

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

Normal renal size (left 6.6 cm, right 6.1 cm) with normal echogenic appearance, cortico-medullary differentiation, pelvis and capsule.

**Reproductive System**

**IMAGING PERFORMED BY**

N/A.

Sonya Myers, DVM

**Adrenal Glands**

**HOSPITAL NAME**

Normal shape, echogenic appearance, and position but small. Left 0.27/0.19 cm, right 0.27/0.33 cm.

Oviedo Veterinary Care and  
Emergency

**Spleen**

**REFERRING VET**

Normal size with a diffuse mottled echogenic appearance, irregular capsule, and no blood flow.

Dr Rivera

**Liver**

**INVOICE**

Small in size with a patchy mottled echogenic appearance, loss of portal markings, and irregular capsule. No nodules or masses evident. Small gall bladder containing small amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.2 cm).

303425

**DATE**

**Gastrointestinal**

9/22/22

Segmental thickening of the stomach (0.94 cm), duodenum (0.62 cm), small intestine, and colon (0.5 cm) with no loss of layering, normal peristaltic activity, and no distension of the lumen. Normal appearance of the ileo-cecal junction. Gas within the stomach.



**PATIENT** *Pancreas*

Mocha Talley Normal size (right 1 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Canine Mesenteric lymphadenomegaly (0.9 x 5.4 cm) with a normal shape and echogenic appearance. No ascites.

**BREED**

Mixed

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Primary Findings:

FS

- Small adrenal glands.
- Gastroenteropathy.
- Hepatopathy.
- Splenic pathology.
- Lymphadenomegaly

**Age**

5 years

**WEIGHT**

Secondary Findings:

77 #

- Gall bladder sediment.

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although the small adrenal glands may be an incidental finding, with the presenting clinical signs, Addison's disease would be an important consideration.

**IMAGING PERFORMED BY**

Sonya Myers, DVM

Etiologies for the gastroenteritis would be secondary to Addison's disease, non-specific (viral, bacterial, protozoal, helminths, toxins, dietary indiscretion), inflammatory bowel disease, granulomatous disease, and dietary hypersensitivity.

**HOSPITAL NAME**

Etiologies for the hepatopathy would be chronic hepatitis, congenital (porto-systemic shunt, portal vein hypoplasia), and cirrhosis.

Oviedo Veterinary Care and  
Emergency

Etiologies for the spleen would be early torsion, hypoperfusion, hypovolemia, splenitis, and infiltrative neoplasia.

**REFERRING VET**

Dr Rivera

The most likely etiology for the lymphadenomegaly would be reactive with lymphadenitis, a differential diagnosis and infiltrative neoplasia an unlikely differential diagnosis.

**INVOICE**

303425

Further assessment would be fecal analysis, basal cortisol assay, cobalamin assay, bile acids, FNA cytology of the liver, spleen, and lymph nodes, and possibly endoscopy of both the upper and lower GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

**DATE**

9/22/22



**PATIENT**

Mocha Talley

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

FS

**Age**

5 years

**WEIGHT**

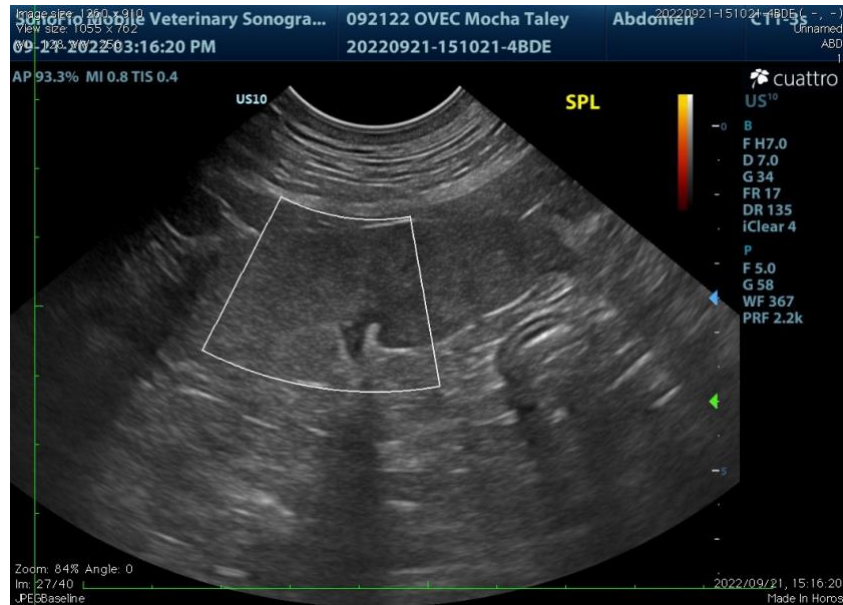
77 #

**IMAGES**

**Left adrenal**



**Spleen**



**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Oviedo Veterinary Care and  
 Emergency

**REFERRING VET**

Dr Rivera

**INVOICE**

303425

**DATE**

9/22/22



**PATIENT Stomach**

Mocha Talley

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

FS

**Age**

5 years

**WEIGHT**

77 #



**Duodenum**

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Oviedo Veterinary Care and  
 Emergency

**REFERRING VET**

Dr Rivera

**INVOICE**

303425

**DATE**

9/22/22





**PATIENT** Liver

Mocha Talley

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

FS

**Age**

5 years

**WEIGHT**

77 #



**Iliac lymph node**

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Oviedo Veterinary Care and  
 Emergency

**REFERRING VET**

Dr Rivera

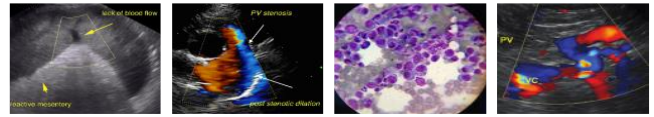
**INVOICE**

303425

**DATE**

9/22/22





**PATIENT** Mesenteric lymph node

Mocha Talley

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

FS

**Age**

5 years

**WEIGHT**

77 #



**INTERPRETED BY**

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

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](mailto:rlobetti@mweb.co.za)

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

Oviedo Veterinary Care and  
 Emergency

**REFERRING VET**

Dr Rivera

**INVOICE**

303425

**DATE**

9/22/22