

PATIENT

Jayne Sommer

SPECIES

Canine

BREED

Miniature Aussie

SEX

FS

AGE

11 months

WEIGHT

16 #

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

303385

DATE

9/8/22

PRESENTING CLINICAL SIGNS

History: Suspected pancreatitis.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

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 (0.2 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4 cm, right 4.4 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.42 cm, right 0.39 cm.

Spleen

Normal size (1 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.2 cm).



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.29 cm, jejunum 0.27 cm) and peristaltic activity, and no distension of the lumen. Large amount fluid/fecal material within the colon. Fluid-filled stomach with thickening of the wall (0.57 cm) but with no loss of layering. Focal hyperechogenic regions within the gastric wall.

Pancreas

Normal size (0.9 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Mild mesenteric lymphadenomegaly (1.8 cm) with normal shape and echogenic appearance.

Small amount of acellular ascites.

Hyperechogenic appearance of the cranial/peri-gastric mesentery.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Gastritis with focal ulceration.
- Mesenteric lymphadenomegaly.
- Mesenteric inflammation.

Secondary findings:

- None.

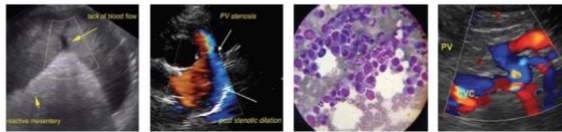
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the gastritis would be non-specific (viral, bacterial, toxins, helminths, dietary indiscretion), ulcerative disease, *Helicobacter* gastritis, and inflammatory bowel disease.

Both the mesenteric lymphadenomegaly and the inflammation can be ascribed to the gastritis.

Further assessment would be fecal analysis and possibly gastroscopy with biopsies if there is not a satisfactory improvement.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be fluid therapy as needed, anti-emetics, and gastric protectants (omeprazole, sucralfate).



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IMAGES

Stomach



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)
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