



PATIENT PRESENTING CLINICAL SIGNS

Allie Hernandez History: Initially presented for difficulty walking with ataxia, progressed to lateral recumbency, unable to stand, and became minimally responsive.

SPECIES Physical Examination: Abdominal mass and abdominal distension. Absent proprioception right front and left hind.

Canine

Urinalysis: SG 1.015, 1+ protein.

BREED

CBC: Normal.

Boston terrier

Recent Serum Biochemistry: Elevated liver enzyme activity.

SEX

Radiographic Findings: Costochondral junction nodule, cranial abdominal mass.

FS

AGE

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

13 years

Urinary System

WEIGHT

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

21.2 #

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

INTERPRETED BY

Normal iliac lymph nodes. Ureters not visualized.

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

Normal renal size (left 5.8 cm, right 6.1 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

IMAGING PERFORMED BY

N/A.

Dr Megan Cassels-Conway,
DVM

Adrenal Glands

HOSPITAL NAME

Normal shape, echogenic appearance, position, and size. Left 1.21 x 0.54 cm, right 1.9 x 0.69 cm.

Central Broward Animal
Hospital

Spleen

REFERRING VET

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

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DVM

Liver

INVOICE

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. Large irregular mottled echogenic bulging cavitatory mass (7 x 8 cm) in the caudal left lobe. Full gall bladder containing normal anechoic bile. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

303392

DATE

Gastrointestinal

9/10/22

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen.



PATIENT *Pancreas*

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

SPECIES *Free Abdomen*

Canine No mesenteric lymphadenomegaly.
No ascites.

BREED

Boston terrier

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Hepatic mass.

Secondary Findings:

- Age-related renal changes.

SEX

FS

AGE

13 years

WEIGHT

21.2 #

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the hepatic mass would be neoplasia with granuloma a less likely differential diagnosis.

INTERPRETED BY

Remo Lobetti, BVSc,
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ECVIM

With the presenting clinical signs, primary neurological disease or CNS/spinal metastatic disease needs to be considered.

Further assessment would be FNA cytology of the liver and if surgery is being contemplated, then MRI scan of the liver, cervical spine, and brain.

IMAGING PERFORMED BY

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DVM

Specific therapy would be dependent on an etiological diagnosis.

HOSPITAL NAME

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REFERRING VET

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PATIENT IMAGES

Allie Hernandez

Liver

SPECIES

Canine

BREED

Boston terrier

SEX

FS

AGE

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21.2 #

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HOSPITAL NAME

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REFERRING VET

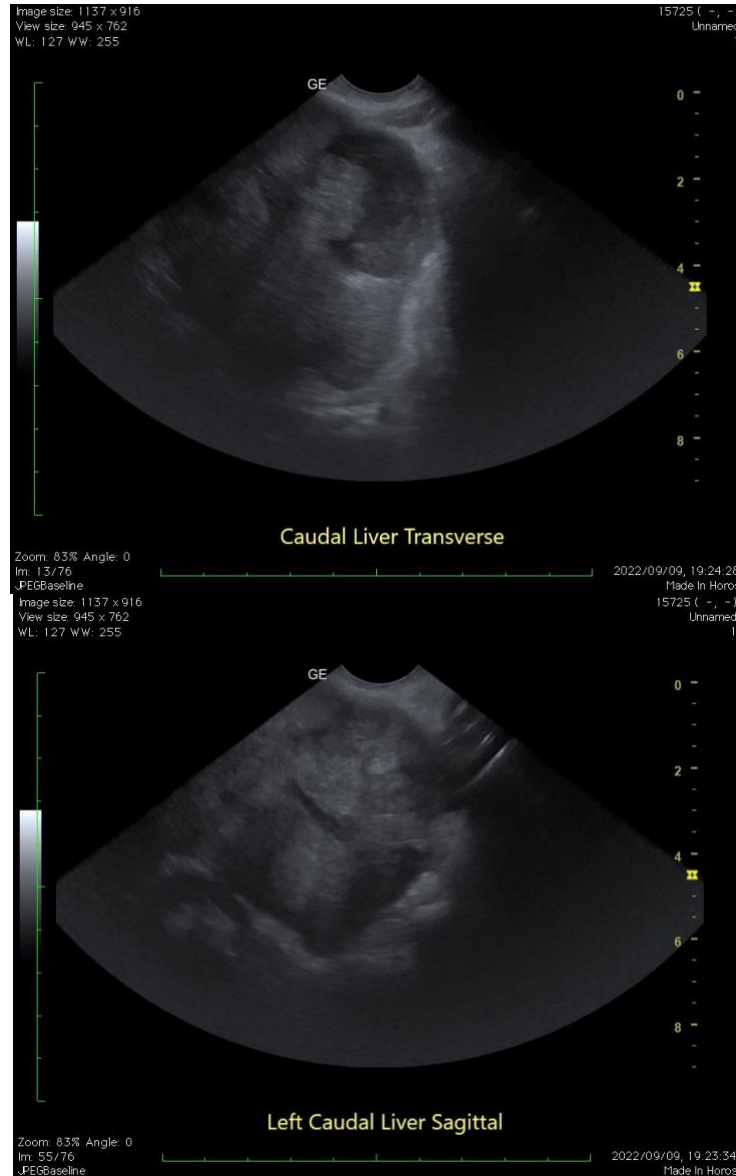
Dr Megan Cassels-Conway,
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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