

**PATIENT**

Bailey Greene

**SPECIES**

Canine

**BREED**

Golden Doodle

**SEX**

FS

**AGE**

7 years

**WEIGHT**

27.6 #

**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**

303393

**DATE**

9/10/22

**PRESENTING CLINICAL SIGNS**

History: Tense abdomen, diarrhea. Possible inappropriate urination/leakage of urine.

Physical Examination: N/A.

Urinalysis: Culture pending.

CBC: Normal.

Serum Biochemistry: Elevated SDMA, rest normal, including cPL.

Radiographic Findings: Normal.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

Small 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 (0.3 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4.4 cm, right 4.6 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis, and capsule.

**Reproductive System**

N/A.

**Adrenal Glands**

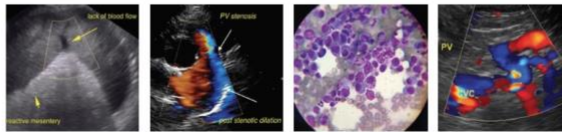
Normal shape, echogenic appearance, position, and size. Left 0.57 cm, right 0.43 cm.

**Spleen**

Normal size (1.5 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. Multiple small faint hypoechoic parenchymal nodules of varying sizes (up to 0.5 cm).

**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.



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**Gastrointestinal**

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.44 cm, jejunum 0.4 cm) and peristaltic activity, and no distension of the lumen. Large amount of fluid/fecal material within the colon.

**Pancreas**

Normal size (right 1.2 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**Free Abdomen**

Mo mesenteric lymphadenomegaly.  
No ascites.

**ULTRASONOGRAPHIC FINDINGS**

Primary findings:

- Splenic nodules.

Secondary findings:

- Age-related renal changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

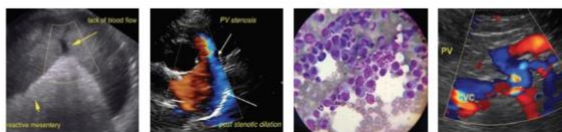
Etiologies for the splenic nodules would be reactive, hyperplasia, hematomas, granulomas, and neoplasia.

The fluid filled colon is in line with the reported clinical finding of diarrhea and most likely of non-specific origin (viral, bacterial, protozoal, helminths, dietary indiscretion, toxins).

Although the elevated SDMA can be associated with early renal disease, at that elevated level, lymphoma needs to be considered, especially with the splenic nodules.

Further assessment would be fecal analysis, FNA cytology of the splenic nodules, and parathyroid hormone-related protein (PTHrP) assay.

Specific therapy would be dependent on an etiological diagnosis.



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**IMAGES**

**Spleen**



**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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