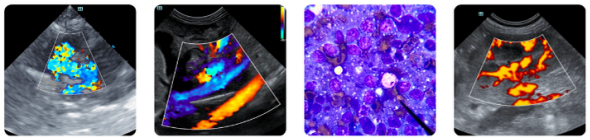


PATIENT

Andi Goodman

SPECIES

Canine

BREED

Westie

SEX

Female

AGE

10 months

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Schmieder

HOSPITAL NAME

Slade Veterinary Hospital

REFERRING VET

Dr. Schmieder

INVOICE

11218

DATE

1/30/2026

PRESENTING CLINICAL SIGNS

- Discussed Andy's persistent diarrhea and poor appetite, which have not resolved with previous treatments including diet changes, metronidazole, and anti-nausea medication. I reviewed that her recent GI panel and other lab work were normal, and the fecal sample results are still pending. The client reported that Andy continues to have soft stools and is vomiting after eating small, canned meals. There is no blood or mucus in the stool. I recommended an abdominal ultrasound as the next diagnostic step. The procedure is scheduled for tomorrow at 11:00.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size, architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Left kidney measures 3.5 cm, and the right kidney measures 3.4 cm.

Adrenal Glands

The left adrenal gland is normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal measures 0.33 cm and 0.3 cm in width.

The right adrenal gland is not clearly visualized but appears to be of normal shape, echogenic appearance, and size.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measures 1.1 cm in width.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder

Full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

PATIENT

Andi Goodman

SPECIES

Canine

BREED

Westie

SEX

Female

AGE

10 months

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Schmieder

HOSPITAL NAME

Slade Veterinary Hospital

REFERRING VET

Dr. Schmieder

INVOICE

11218

DATE

1/30/2026

Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. Normal thickness of the small intestine (up to 0.4 cm) with no loss of layering but with an increase in the muscularis to mucosa ratio. Normal peristaltic activity and no distension of the lumen.

Pancreas

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

Free Abdomen

Enlarged mesenteric lymph nodes, measuring up to 0.5 cm x 1.3 cm in size maintain a normal shape and echogenic appearance.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Enteropathy.
- Mesenteric Lymphadenomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

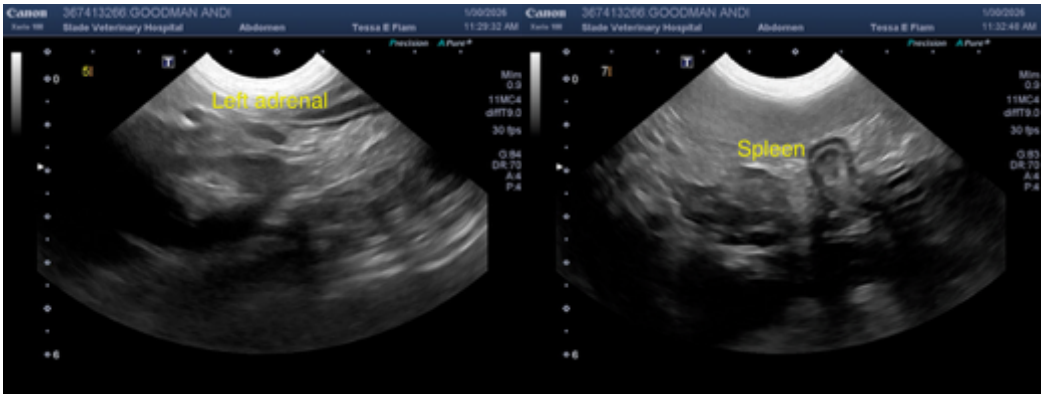
Etiologies for the enteropathy would be parasitic enteritis, dietary hypersensitivity and inflammatory bowel disease.

The most likely etiology for the mesenteric lymphadenomegaly would be reactive hyperplasia, either secondary to the enteropathy or age related with lymphadenitis and infiltrative neoplasia highly unlikely differential diagnoses.

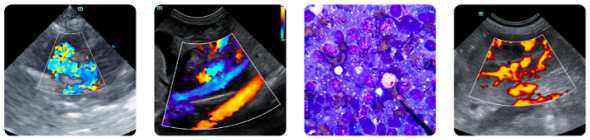
Further assessment would be endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

Symptomatic management that could be considered would be feeding a novel protein/hypoallergenic diet and if indicated a course of fenbendazole. If there's not a satisfactory improvement, then a course of prednisolone would then be indicated.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Andi Goodman

SPECIES

Canine

BREED

Westie

SEX

Female

AGE

10 months

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Schmieder

HOSPITAL NAME

Slade Veterinary Hospital

REFERRING VET

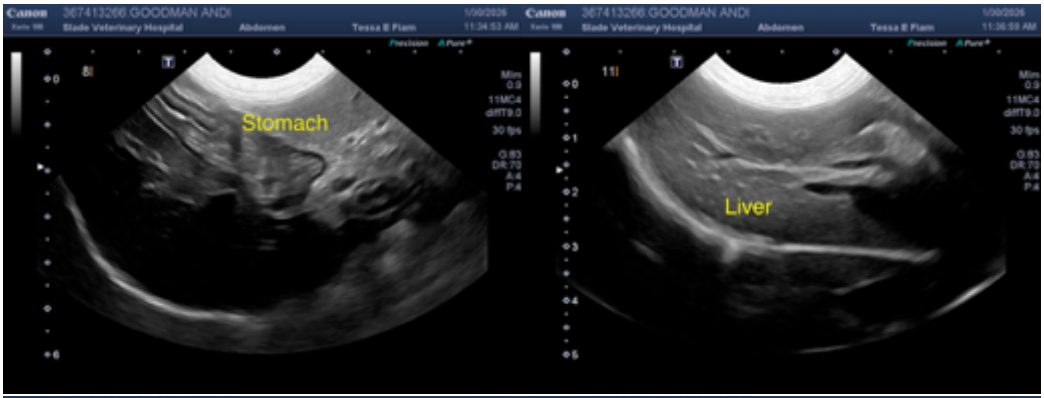
Dr. Schmieder

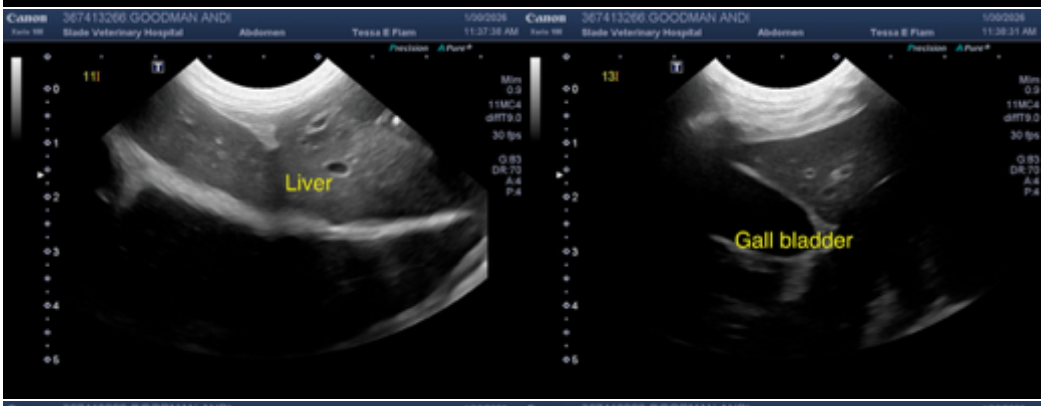
INVOICE

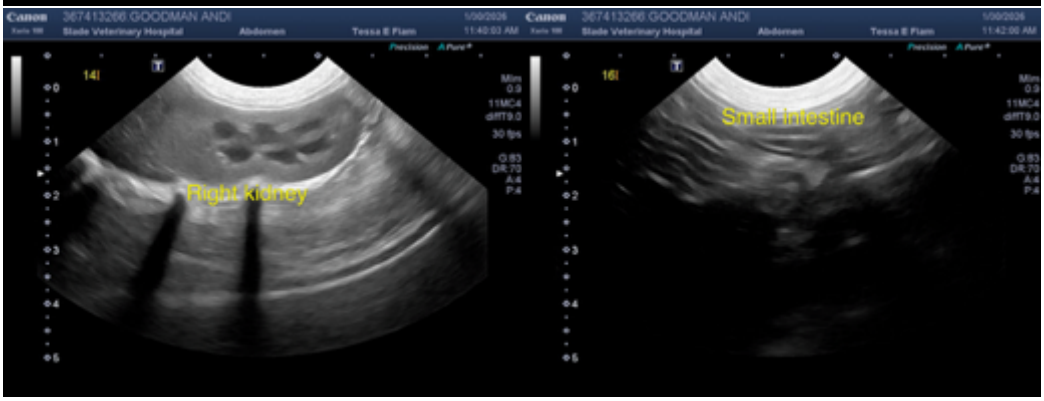
11218

DATE

1/30/2026







PATIENT

Andi Goodman

SPECIES

Canine

BREED

Westie

SEX

Female

AGE

10 months

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Schmieder

HOSPITAL NAME

Slade Veterinary Hospital

REFERRING VET

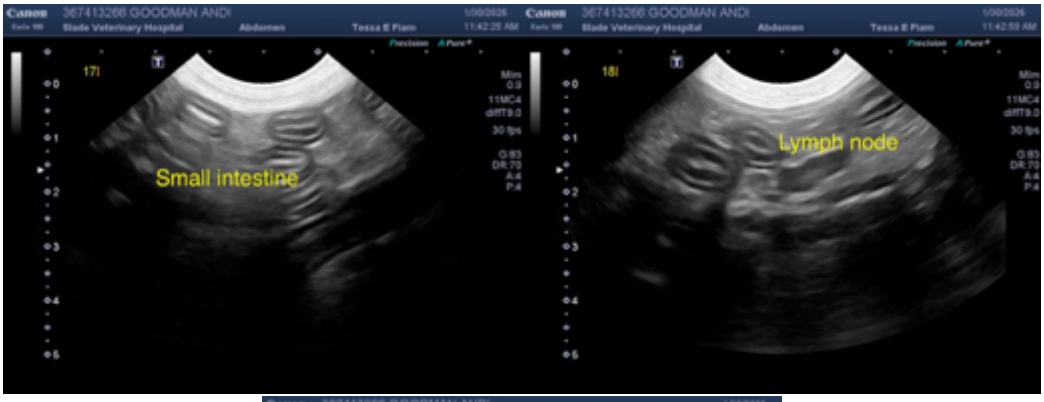
Dr. Schmieder

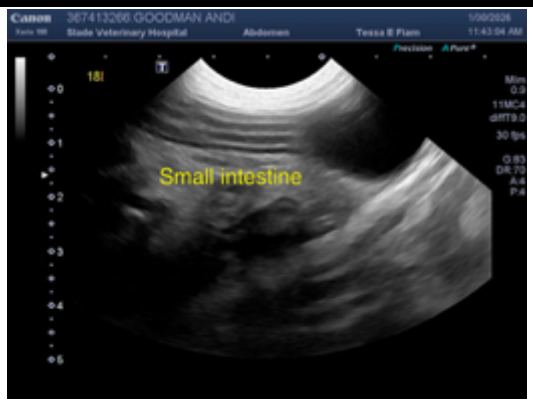
INVOICE

11218

DATE

1/30/2026





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)

info@sonopath.com