



PATIENT

Biscuit Misasi

SPECIES

Canine

BREED

Yorkie

SEX

Spayed female

AGE

15 years

WEIGHT

8.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shannon Matthies

HOSPITAL NAME

Saugerties AH

REFERRING VET

Dr. Matthies

INVOICE

69904

DATE

1/7/26

PRESENTING CLINICAL SIGNS

History: Lethargy and poor appetite for past 5-7 days History of elevated liver enzymes that are worsening in the past year Recent onset of PU/PD

PE - cranial abdominal organomegaly, tense abdomen, dental disease, grade II systolic murmur, sparse haircoat. Chem - elevated liver enzymes for the past year, current values: - ALT 343 (n 10-125), - ALP 475 (n 23-212), GGT 32 (n 0-11) - BUN 48 (n 7-27), SDMA 16 (n 0-14), creat 1.6 (n 0.5-1.8). CBC - low-normal HCT 37.3%, leukocytosis (WBC 17.46, n 5.05-16.76) consisting of lymphocytosis 9.08k/uL (n 1.05-5.1) and monocytosis 1.34k/uL (n 0.16-1.12) and mild thrombocytosis (platelet count 518k/uL (n 148-484).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full 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 (left measured 3.1 cm, right measured 3.7 cm), increased echogenic appearance, loss of cortico-medullary differentiation, pyelectasia and an irregular capsule. No infarcts, mineralization or renoliths evident. Bilateral mineralization is evident.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.49 cm and 0.46 cm in width. The right adrenal gland measured 0.3 cm and 0.35 cm in width.

Spleen

A focal, hypoechogenic parenchymal nodule in the body of the spleen measuring 0.5 cm in size. Irregular, mottled echogenic parenchymal nodule/small mass in the body of the spleen measuring 0.8 x 1.7 cm in size with bulging of the overlying capsule evident. The rest of the spleen is of normal size (1.1 cm in width) maintaining a normal echogenic appearance, smooth homogenous parenchyma and regular curvilinear capsule.

Liver

Large, irregular, mottled echogenic mass in the cranial aspect of the left lobe measuring 4.0 x 6.0 cm in size. The rest of the liver is enlarged with rounded edges with a diffuse increased echogenic and coarse appearance, normal portal markings, and regular curvilinear capsule. No nodules or additional masses evident. Normal appearance of the hepatic and portal vasculature.



PATIENT

Biscuit Misasi

SPECIES

Canine

BREED

Yorkie

SEX

Spayed female

AGE

15 years

WEIGHT

8.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shannon Matthies

HOSPITAL NAME

Saugerties AH

REFERRING VET

Dr. Matthies

INVOICE

69904

DATE

1/7/26

Gallbladder

The gallbladder is small containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, 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.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Hepatic mass.
- Hepatopathy.
- Splenic nodule.
- Splenic mass.
- Renal disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the hepatic mass would be primary hepatocellular carcinoma with granuloma and hematoma an unlikely differential diagnosis.

The most likely diagnosis for the splenic mass would be neoplasia with hematoma a less likely differential diagnosis.

Etiologies for the small splenic nodule would be reactive hyperplasia/extramedullary hemopoiesis, hematoma, granuloma and possibly neoplasia.

The appearance of the kidneys is consistent with chronic kidney disease.

Although the pyelectasia is most likely associated with the chronic kidney changes, underlying low-grade pyelonephritis should still be considered.



PATIENT

Biscuit Misasi

SPECIES

Canine

BREED

Yorkie

SEX

Spayed female

AGE

15 years

WEIGHT

8.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shannon Matthies

HOSPITAL NAME

Saugerties AH

REFERRING VET

Dr. Matthies

INVOICE

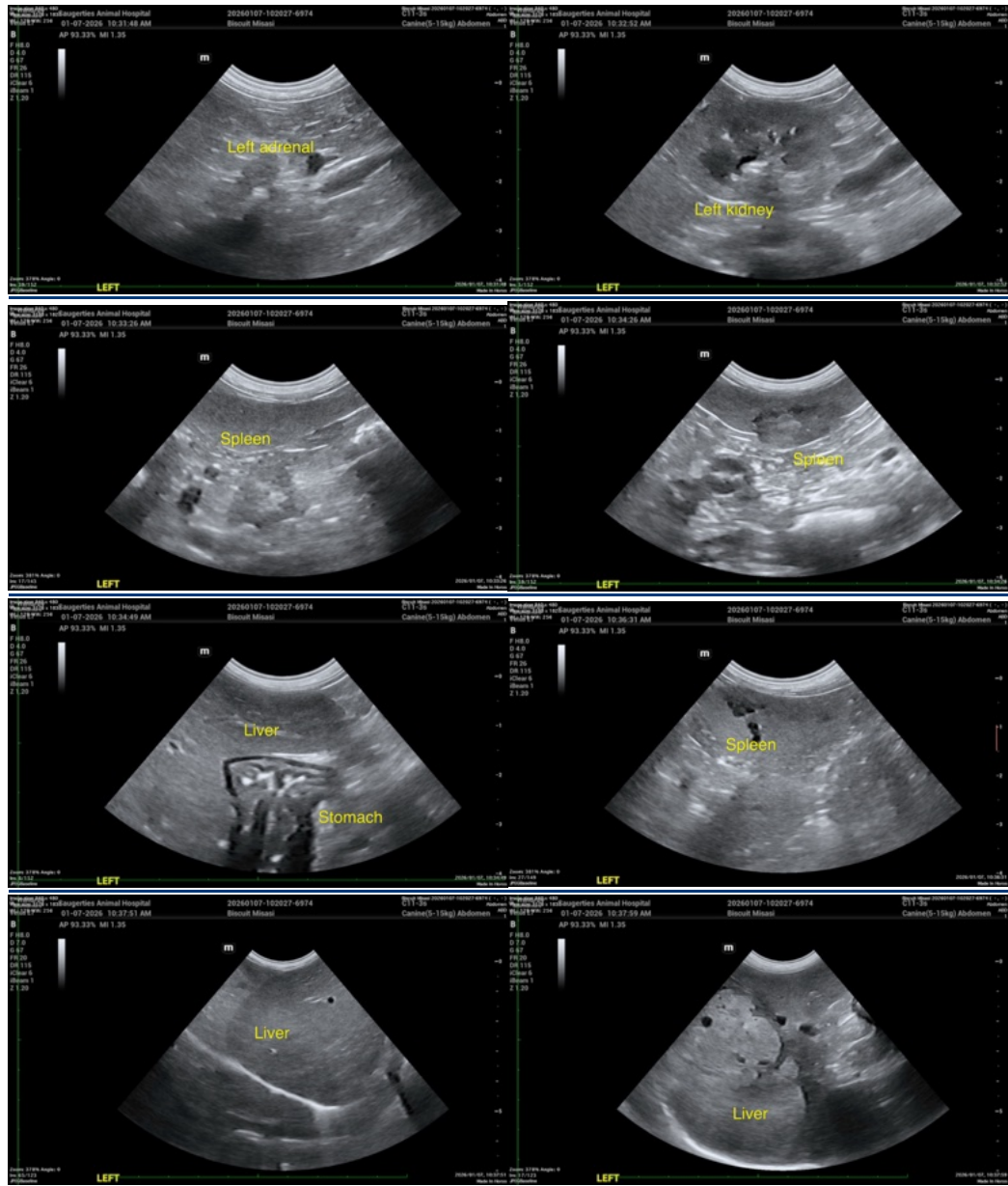
69904

DATE

1/7/26

Further assessment would be urinalysis, urine culture, three view thoracic radiographs, echocardiography to evaluate the right atrium and right auricle and FNA cytology of the splenic mass and hepatic mass.

Specific therapy would be dependent on an etiological diagnosis.





PATIENT

Biscuit Misasi

SPECIES

Canine

BREED

Yorkie

SEX

Spayed female

AGE

15 years

WEIGHT

8.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shannon Matthies

HOSPITAL NAME

Saugerties AH

REFERRING VET

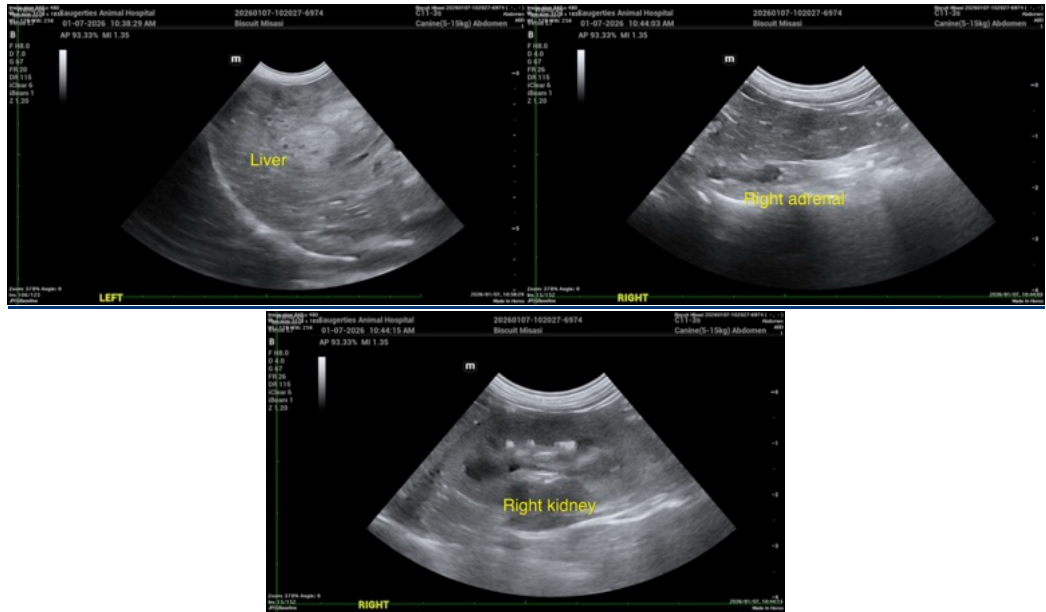
Dr. Matthies

INVOICE

69904

DATE

1/7/26



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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