



PATIENT

Zara Boklep

SPECIES

Canine

BREED

PitBull

SEX

Spayed female

AGE

7 years

WEIGHT

52 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chrissy Krell, DVM

HOSPITAL NAME

Lake Region Small
Animal Center

REFERRING VET

Dr. Greiner

INVOICE

69156

DATE

11/28/25

PRESENTING CLINICAL SIGNS

History: Patient presented for a slightly more chronic note of weight loss (was 60 lbs in April 2025). Recently she had presented for 5 day history of ADR, vomiting Thursday, not eating or drinking, dark stools. Possibly chewed up/ate some foam/mat. Seen at another clinic and treated with SQ fluids and cerenia, no improvement. Seen at LRSAH for reassessment on 11/25/25. Improving since patient started steroids (O started Prednisone 20mg PO SID for three days). Improved appetite, no vomiting, heavy panting and improved attitude. Also on Cerenia 60mg tab PO SID.

Abnormal PE/Chem/CBC/UA Results: PE: 11/25/25 - QAR, MM pnk, CRT 2 sec, HR 150, Inn normal, HR 150, RR 24, firm "egg" structure palpated mid abdomen?, T 101.2, BCS 3/9. Rads - very large stomach with possible ingesta/foam material, stricture of stomach on VD, dilated small bowel loops in distal SI. Labs - all values wnl.

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 6.2 cm, right measured 6.5 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 3.41 cm in length x 0.61 cm and 0.57 cm in width. The right adrenal gland measured 2.23 cm in length x 0.58 cm in width.

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 measured 1.7 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.



PATIENT

Zara Boklep

SPECIES

Canine

BREED

PitBull

SEX

Spayed female

AGE

7 years

WEIGHT

52 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chrissy Krell, DVM

HOSPITAL NAME

Lake Region Small
Animal Center

REFERRING VET

Dr. Greiner

INVOICE

69156

DATE

11/28/25

Gallbladder

The gallbladder is 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

Focal, hypoechoic, non-vascularized mural mass in the fundus of the stomach measuring 0.9 x 1.9 cm in size. A moderate amount of ingesta was present in the stomach. The rest of the stomach wall is of normal thickness with no loss of layering and maintaining a 1:3 muscularis to mucosa ratio. Normal appearance of the 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

- Gastric mass.

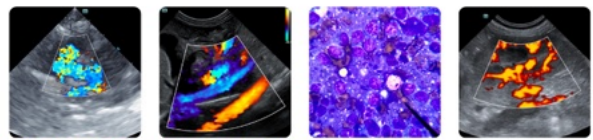
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the gastric mass would be granuloma, severe Helicobacter gastritis, ulcerative disease and neoplasia.

Further assessment would be three view thoracic radiographs and FNA cytology of the mass.

Gastroscopy with biopsies could also be considered.

Specific therapy would be dependent on an etiological diagnosis.



PATIENT

Zara Boklep

SPECIES

Canine

BREED

PitBull

SEX

Spayed female

AGE

7 years

WEIGHT

52 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chrissy Krell, DVM

HOSPITAL NAME

Lake Region Small
Animal Center

REFERRING VET

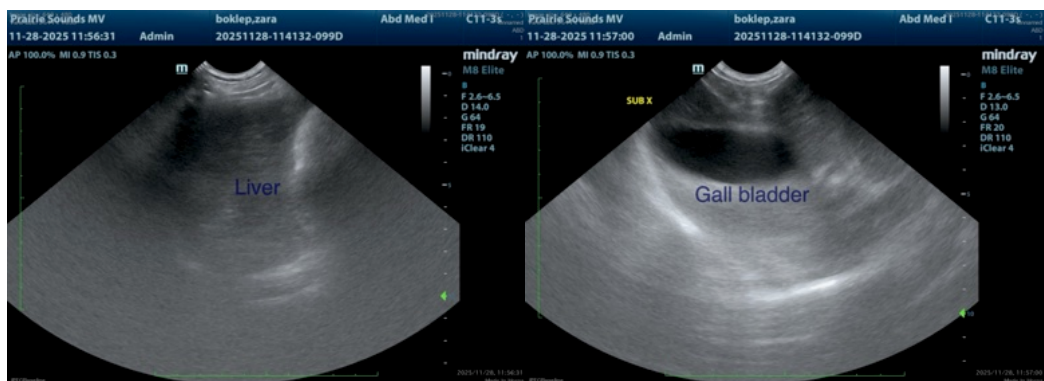
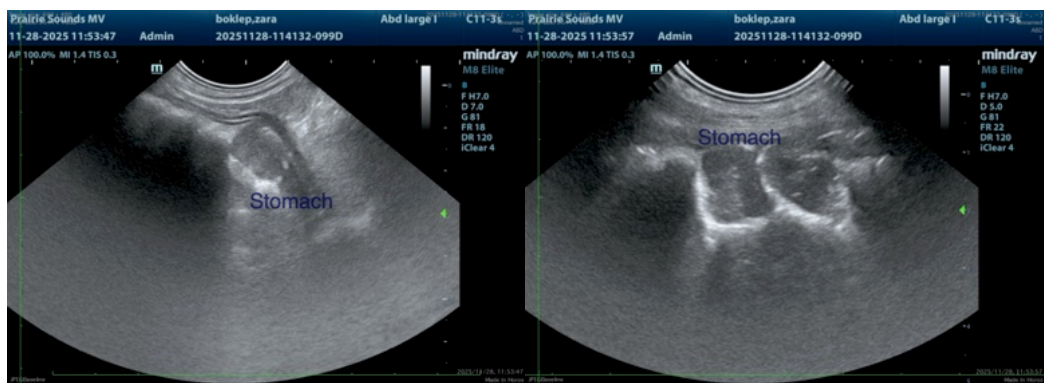
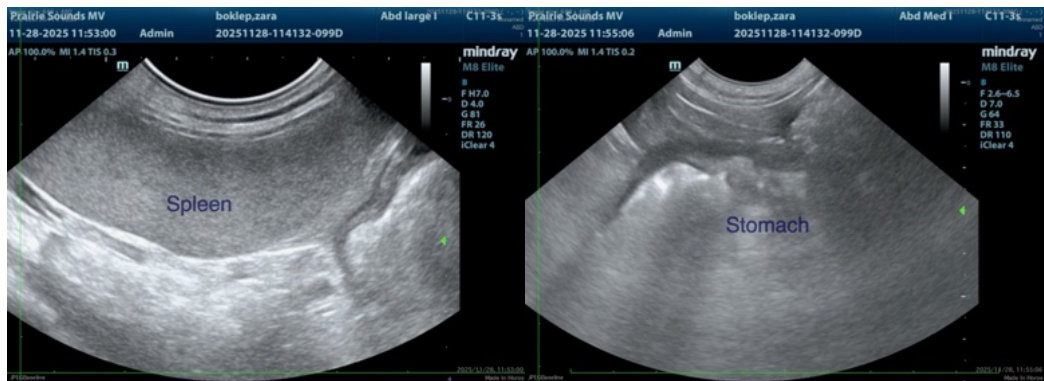
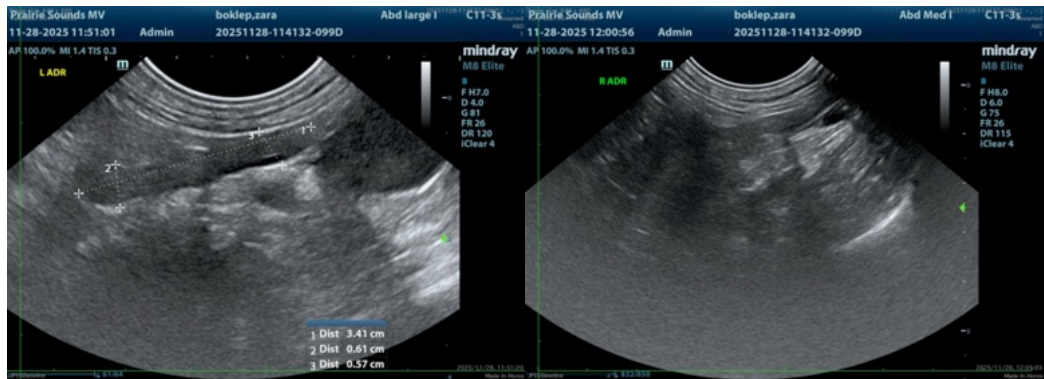
Dr. Greiner

INVOICE

69156

DATE

11/28/25





PATIENT

Zara Boklep

SPECIES

Canine

BREED

PitBull

SEX

Spayed female

AGE

7 years

WEIGHT

52 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chrissy Krell, DVM

HOSPITAL NAME

Lake Region Small
Animal Center

REFERRING VET

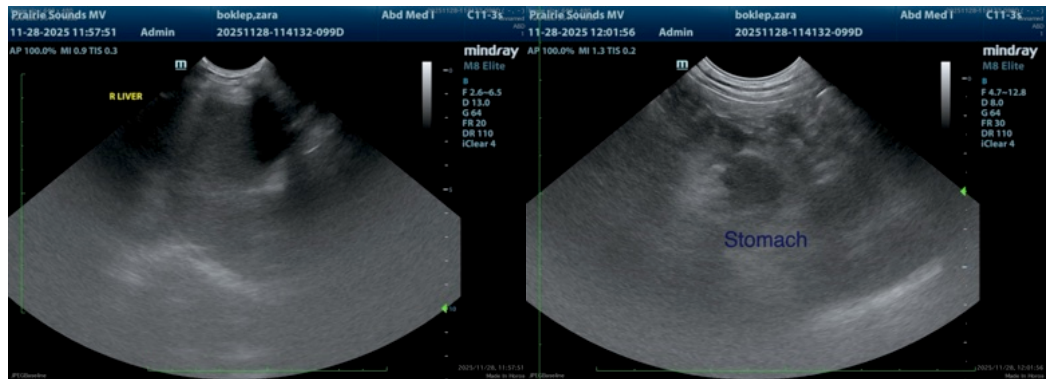
Dr. Greiner

INVOICE

69156

DATE

11/28/25



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