



PATIENT

Lady Macbeth
Barishman

SPECIES

Canine

BREED

Corgi X

SEX

FS

AGE

13 years 8 months

WEIGHT

27.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Gogluizza

HOSPITAL NAME

Evendale-Blue Ash Pet
Hospital

REFERRING VET

Dr. Gogluizza

INVOICE

11530

DATE

3/19/2026

PRESENTING CLINICAL SIGNS

- History of intermittent vomiting and mildly elevated ALT.
- Prev history of seizures - currently managed on Keppra.
- Moved to OH from AZ 6/2025
- Currently on Omeprazole - hit or miss if this helps control the vomiting, usually bilious. Owner has added in an additional meal midday and an evening snack as she was having bilious vomit in the middle of the night.
- As of 3/19/26, she has not vomited in 2 weeks - only change is owner d/c giving green beans even though she has eaten them for years and tolerated them in the past.
- ALT elevation noted at initial visit on 6/23/25 - owner did not pursue additional treatments/diagnostics.
- Recheck BW on 12/17/25 and it had increased.
- Initiated Denamarin 12/30/25 and rechecked ALT 1/30/26 with some decrease in the value.
- Patient is historically difficult to medication with oral pills - owner d/c Denamarin 3/15/26.
- Patient is e/d and acting herself otherwise. No c/s/d.
- Last CBC/Chem/UA performed 6/24/25.

Abnormal PE/Chem/CBC/UA Results: 6/24/25 ALT: 131 12/17/25 ALT: 308 1/30/26 ALT: 174.

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 4.7 cm, and the right kidney measures 5.2 cm.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal measures 1.72 cm in length x 0.57 cm and 0.39 cm in width. Right adrenal gland measures 2.04 cm in length x 0.51 cm and 0.3 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 measures 1.4 cm in width. Incidental myelolipomas present.

Liver



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

Gallbladder

Small containing small amount of non-adhered hyperechogenic sediment. 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

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

Free Abdomen

Normal mesenteric lymph nodes.

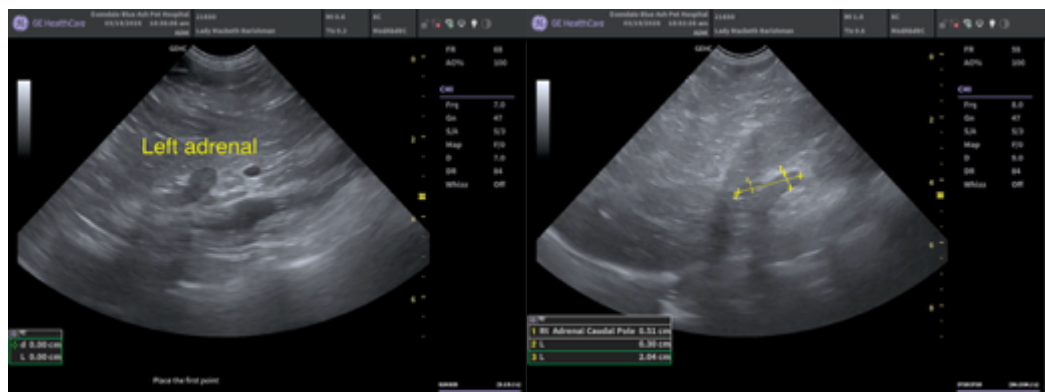
No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Gallbladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

In essence, a normal ultrasound examination of the abdomen, as the gallbladder sediment can be considered an incidental finding.





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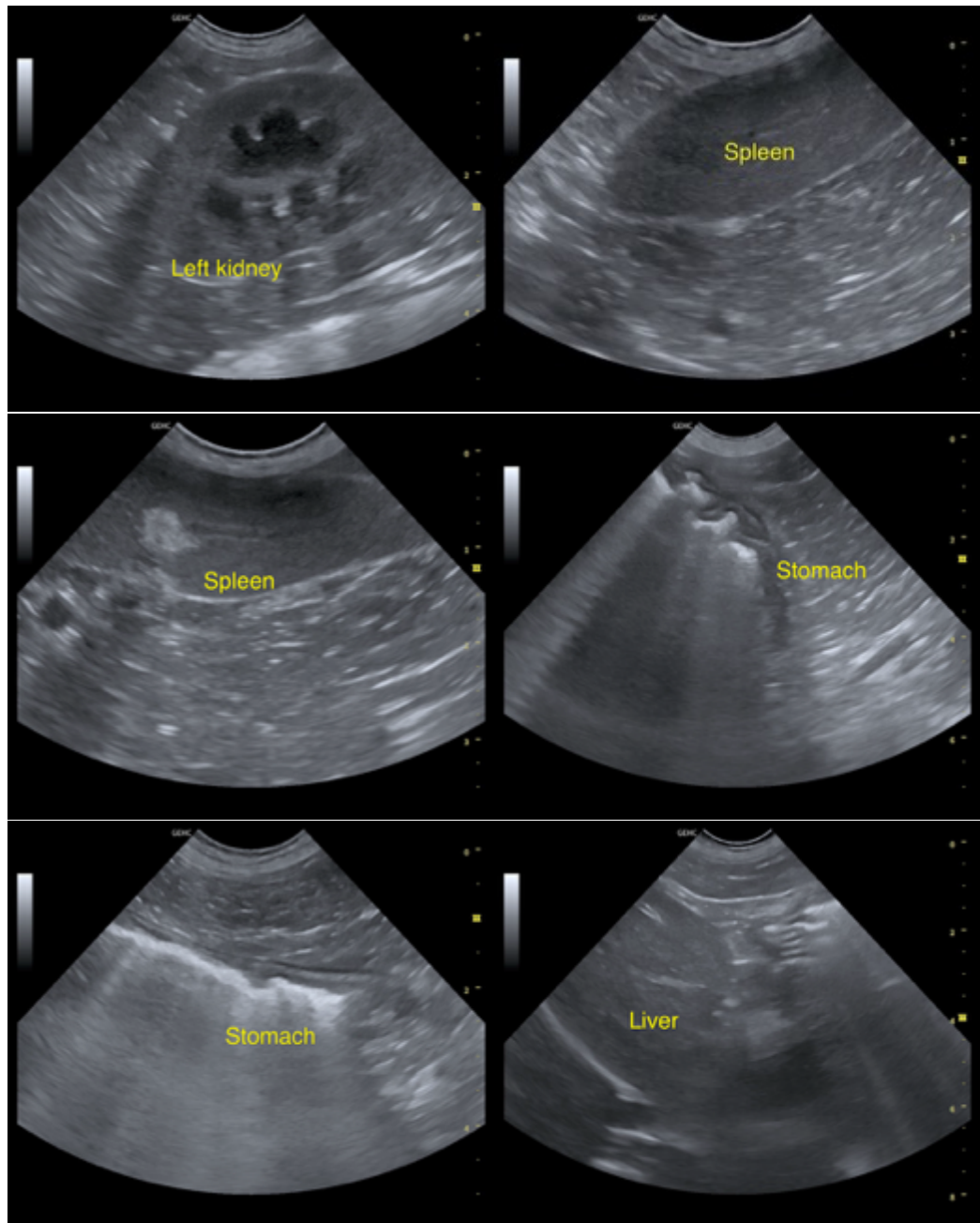
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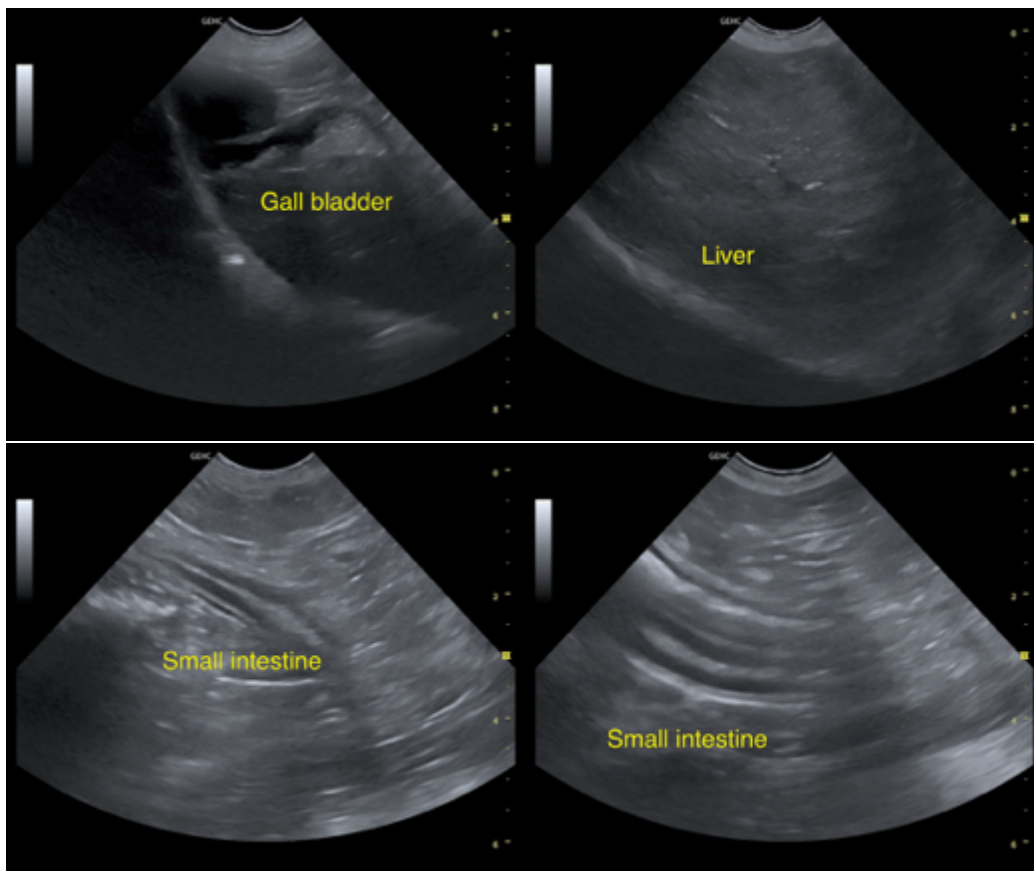
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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