



PATIENT

Zoe Wagner

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

9 years

WEIGHT

29 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Maria Lara DVM

HOSPITAL NAME

Allure Veterinary
Hospital and Urgent
Care

REFERRING VET

Dr. Reed

INVOICE

74648

DATE

4/20/26

PRESENTING CLINICAL SIGNS

History: Patient presented today (4/20) for having a first ever seizure and coughing blood post-ictal. not eating or drinking today after the seizure. No bruising was noted anywhere in the body during physical exam.

Bruising was noted (petechia like) noted on ventral abdomen after ultrasound was performed. Patient has lapsed on her flea and tick prevention in her life time but is current at this time. CBC RBC 8.99 - 5.65 - 8.87 M/ μ L H Reticulocytes 9.0 - 10.0 - 110.0 K/ μ L L Platelets 51 - 148 - 484 K/ μ L L MPV 13.6 - 8.7 - 13.2 fL H Plateletcrit 0.07 - 0.14 - 0.46 % L Chem BUN 28 - 7 - 27 mg/dL H

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small 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 6.4 cm, right measured 5.9 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 0.41 cm and 0.43 cm in width. The right adrenal gland measured 0.52 cm and 0.47 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 2.8 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.



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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

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

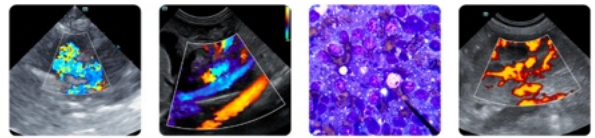
- Normal ultrasound examination of the abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Normal ultrasound examination of the abdomen. On this ultrasound there is no obvious aetiology for the thrombocytopenia. The most likely diagnosis would be primary immune mediated thrombocytopenia.

Drug comparison for immune-mediated thrombocytopenia in dogs

- Glucocorticoids (Prednisolone/Dexamethasone): First-line therapy. Onset 3–7 days. Effective and inexpensive but associated with side effects such as PU/PD and muscle loss.
- Vincristine: Rapid onset (1–3 days). Used for severe cases to quickly increase platelet counts Not for long-term use.
- Mycophenolate mofetil: Common adjunct. Onset 5–10 days. Well tolerated but may cause diarrhea.
- Azathioprine: Slower onset (7–14 days). Risk of bone marrow suppression and hepatotoxicity. Less commonly used now.
- Cyclosporine: Strong immunosuppressant. Onset 5–10 days. Useful in refractory cases but can be expensive.
- IV Immunoglobulin (IVIG): Very rapid effect (24–48 hrs). Used in life-threatening cases. Expensive and temporary.
- Romiplostim: Stimulates platelet production. Used in refractory IMT. Limited veterinary data.



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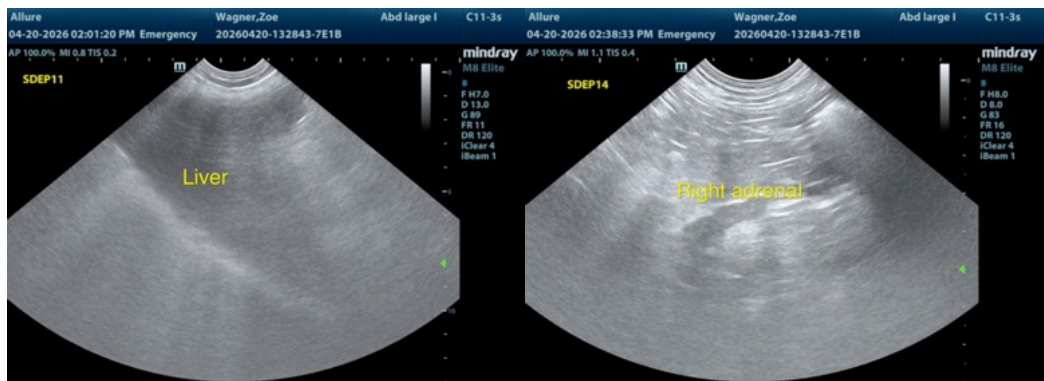
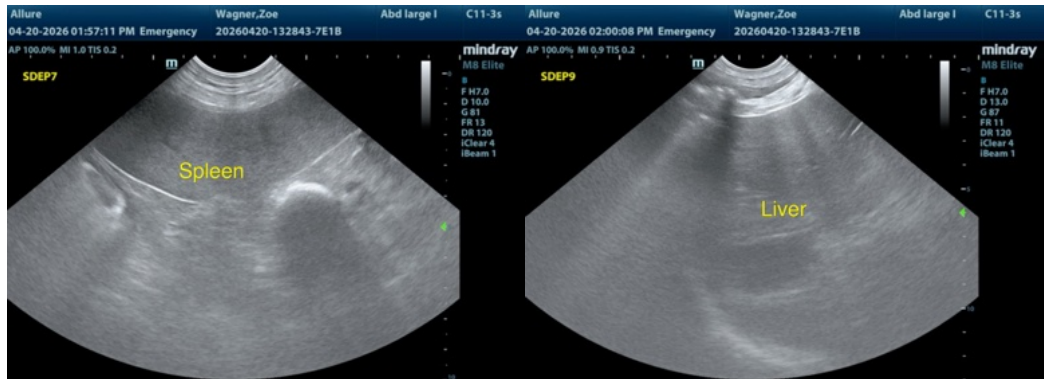
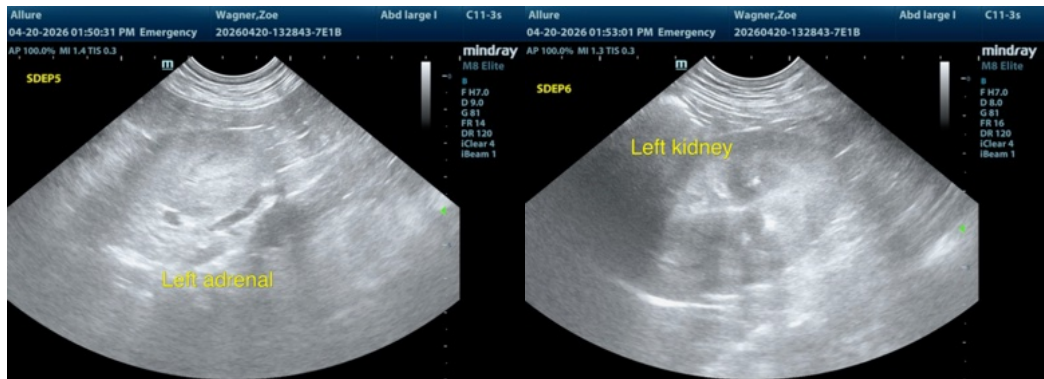
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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