



PATIENT

Buddy Maniace

SPECIES

Canine

BREED

Mt Feist

SEX

Neutered male

AGE

10 years

WEIGHT

21.4 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski,
DVM, MA

HOSPITAL NAME

Western New York
Veterinary Service

REFERRING VET

Dr. Lefler

INVOICE

74327

DATE

4/9/26

PRESENTING CLINICAL SIGNS

RDVM REASON FOR REFERRAL: Patient had an episode of vomiting and a painful abdomen in March. This has been resolved, but the owner reports the patient still feels abdominal pain. Recommend abdominal U/S to R/O any masses or bleeding issues in the abdomen. Patient is a Mountain Feist/Papillon mix. History of high platelet count and high white blood cells. He vomited blood last year. Most recently, he vomited 6 times in one night and then did not eat for a day and a half. He had very bloodshot, glazed-over eyes and had just finished a course of eye drops. The owner reports he winces when his stomach is touched and has been seen in a "praying" posture, indicating abdominal pain. He is currently on a diet of white rice and baby food due to stomach sensitivity. He has a history of stomach issues, including bloody diarrhea. He has tested negative for Anaplasma and Lyme disease.

The owner reports he got into a sanitary pad, but it was shredded, not eaten. The vomiting episode occurred before this incident. Patient was fasted since noon yesterday.
April 6, 2026 CBC MCV 60.3 fL LOW MCH 21.1 pg LOW Eosinophils 1.68 K/uL HIGH Platelets 816 K/uL HIGH Plateletcrit 1.00% HIGH March 18, 2026 CBC MCV 60.2 fL LOW WBC 16.88 K/uL HIGH Neutrophils 14.15 K/uL HIGH Platelets 706 K/uL HIGH Plateletcrit 0.78% HIGH Blood Chem Alb 4.0 g/dL HIGH Amy 1,551 U/L HIGH July 3, 2025 CBC MCV 61.0 fL LOW Reticulocyte 21.6 pg LOW WBC 17.62 K/uL HIGH Neutrophil 15.60 K/uL HIGH Pit 486 K/uL HIGH Plateletcrit 0.60% HIGH Blood chem K 2.8 mmol/L LOW AST 119 U/L HIGH

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 5.1 cm, right measured 5.0 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.

The prostate is small and hypoechogenic measuring 0.8 cm in width.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 1.76 cm in length x 0.47 cm and 0.51 cm in width. The right adrenal gland measured 1.65 cm in length x 0.7 cm and 0.61 cm in width.



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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 1.0 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

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

Shadowing foreign body was noted in the gastric lumen measuring 4.0 cm in size. Normal thickness of the gastric wall 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. Fecal material was present in the colon.

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.

Thorax

Normal appearance of the heart. No pericardial or pleural effusion evident.



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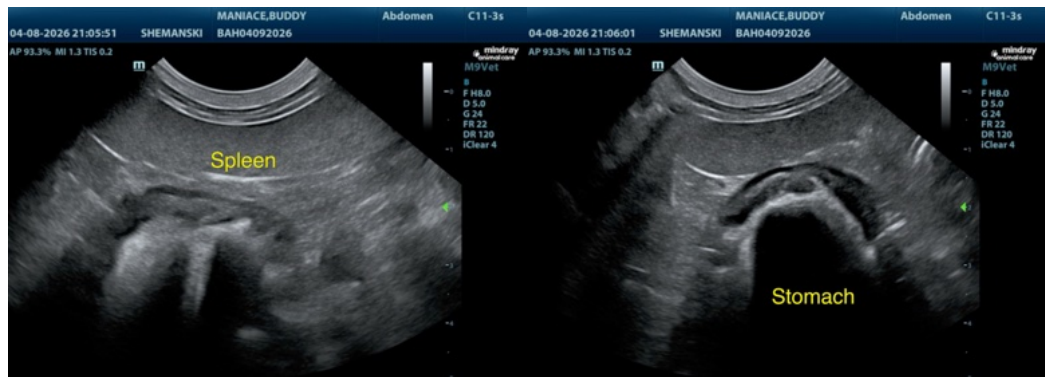
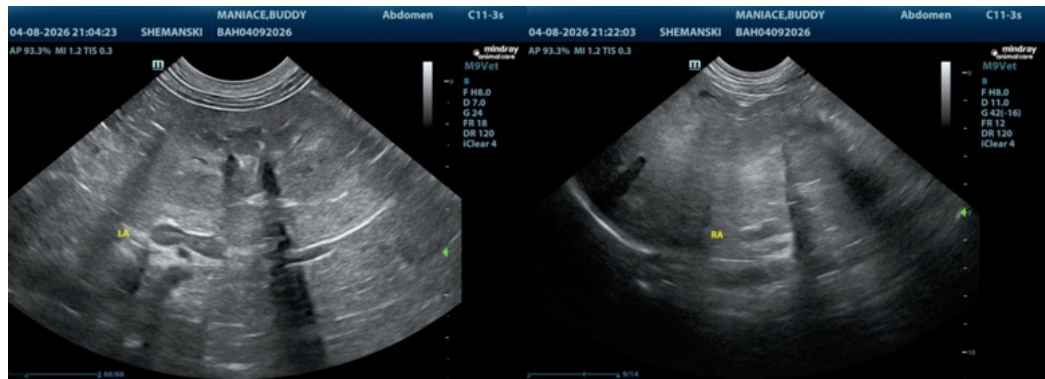
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ULTRASONOGRAPHIC FINDINGS

- Gastric foreign body.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Further assessment and therapy would be a laparotomy to remove the foreign body.





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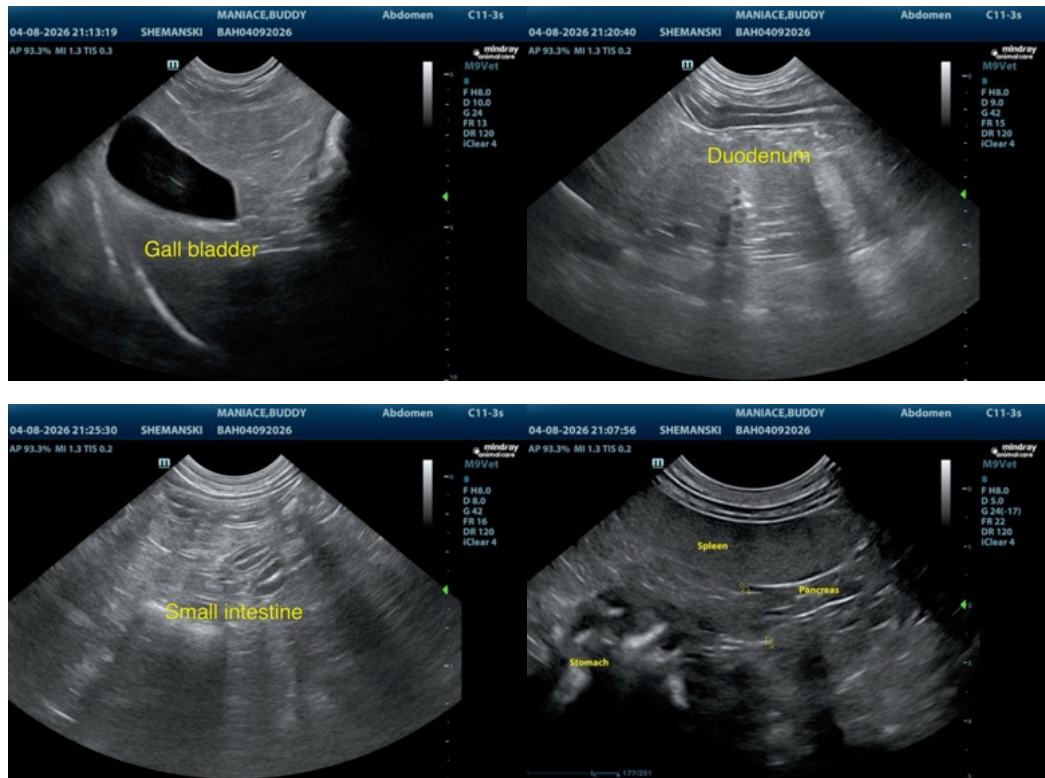
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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