



PATIENT PRESENTING CLINICAL SIGNS

Max Parra History: Chronic GI issues

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED The urinary bladder is small with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Poodle Normal appearance of the trigone area, proximal urethra (0.40 cm), and iliac blood vessels.

SEX Normal appearance and size of the iliac lymph nodes (one of which measures 1.50 cm). Ureters not visualized, which can be considered a normal finding.

Intact Male

AGE Normal renal size (left kidney 5.40 cm) (right kidney 5.70 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.

3 years

WEIGHT **Reproductive System**

35 lbs Normal size and appearance of the testicles (left 2.70 cm / right 3.00 cm). Mildly enlarged prostate (2.30 cm) with an increased echogenic appearance and regular capsule. Normal appearance of the periprostatic tissue.

INTERPRETED BY

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

Adrenal Glands

Normal shape, echogenic appearance, and position, as well as the visible peri-renal vasculature. Normal size of the left adrenal gland (0.47 x 0.51 cm). Small right adrenal gland (0.39 x 0.33 cm).

IMAGING PERFORMED BY

Spleen

Normal size (1.50 cm) 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.

Sonya Myers DVM

HOSPITAL NAME

Liver

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

Banfield Oviedo

REFERRING VET

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 (0.20 cm).

Nicklin

Gastrointestinal

Normal appearance of the stomach (0.33 cm), duodenum (0.35 cm), jejunum (0.30 cm), small intestine, ileocecal junction, and colon (0.19 cm) with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. Moderate amount of ingesta within the stomach.

INVOICE

14075

DATE

Pancreas

Normal size (left 1.10 cm / right 1.10 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

8.12.23

Free Abdomen

Mesenteric lymphadenomegaly (1.20 cm x 3.50 cm) with normal shape and echogenic appearance.



PATIENT

No ascites evident.

Max Parra

SPECIES

Canine

BREED

Poodle

SEX

Intact Male

AGE

3 years

WEIGHT

35 lbs

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Mesenteric lymphadenomegaly
- Small right adrenal gland (?)
- Mild prostatomegaly

Secondary Findings

- None

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the mesenteric lymphadenomegaly would be reactive with lymphadenitis and infiltrative neoplasia highly unlikely differential diagnoses.

INTERPRETED BY

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

Although the small right adrenal gland may be an incidental finding, Addison's disease needs to be considered, especially in light of the chronic GIT signs. The appearance of the prostate is consistent with benign prostatic hyperplasia, and in line with the intact nature of the patient. Although the GIT tract appears ultrasonographically normal, an underlying gastroenteritis is still feasible, with possible etiologies being inflammatory bowel disease, dietary hypersensitivity, and parasitic enteritis.

IMAGING PERFORMED BY

Sonya Myers DVM

Further assessment would be fecal analysis, cobalamin assay, basal cortisol, and possibly FNA cytology of the mesenteric lymph nodes and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

HOSPITAL NAME

Banfield Oviedo

REFERRING VET

Nicklin

INVOICE

14075

DATE

8.12.23





PATIENT

Max Parra

SPECIES

Canine

BREED

Poodle

SEX

Intact Male

AGE

3 years

WEIGHT

35 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Sonya Myers DVM

HOSPITAL NAME

Banfield Oviedo

REFERRING VET

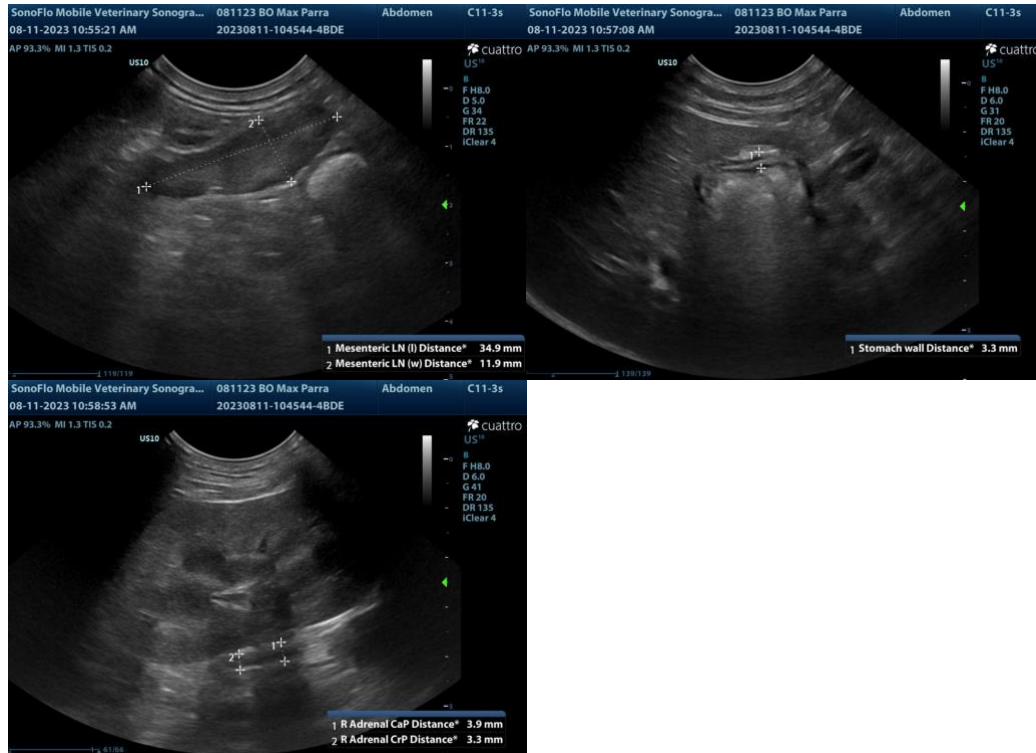
Nicklin

INVOICE

14075

DATE

8.12.23



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)
info@sonopath.com