



PATIENT

Kylie Rostadimas

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed female

AGE

13 years

WEIGHT

85 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Meghan Morse, LVT,
CVT

HOSPITAL NAME

Animal General on the
Hudson

REFERRING VET

Dr. DiGiuseppi

INVOICE

72347

DATE

3/9/26

PRESENTING CLINICAL SIGNS

- Chronic Gi signs
- Several SQ masses
- Severe oral plaque
- T4 1.1 Hyperkalemia 5.6 Cortisol low 0.3- normal ACTH stim CBC- WNL

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 6.1 cm, right measured 5.2 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 cm. The right adrenal gland measured cm.

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. Hypoechoic, non-vascularized parenchymal nodule in the head of the spleen measuring 0.9 x 1.4 cm in size. The spleen measures 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.

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.



PATIENT

Kylie Rostadimas

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed female

AGE

13 years

WEIGHT

85 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Meghan Morse, LVT,
CVT

HOSPITAL NAME

Animal General on the
Hudson

REFERRING VET

Dr. DiGiuseppi

INVOICE

72347

DATE

3/9/26

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.

Multiple, cutaneous lipomas are present.

ULTRASONOGRAPHIC FINDINGS

- Splenic nodule.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the splenic nodule would be an incidental reactive hyperplasia/extramedullary hemopoiesis with hematoma, granuloma and emerging neoplasia a less likely differential diagnosis.

On this ultrasound there is no obvious etiology for the chronic gastrointestinal signs.

Although the GI tract appears ultrasonographically normal with the presenting clinical signs an underlying enteropathy such as dietary hypersensitivity, parasitic enteritis and inflammatory bowel disease should still be considered.

Chronic pancreatitis and exocrine pancreatic insufficiency would be less likely differential diagnosis.

Further assessment would be fecal analysis, cobalamin, folate, CPL/PSL and TLI assay and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

Symptomatic management would be feeding a novel protein/hypoallergenic diet, course of Fenbendazole, cobalamin supplementation and if there is still not a satisfactory improvement then a course of Prednisolone would then be indicated.

Monitoring of the splenic nodule would be recommended and if there is any progressive enlargement or bulging of the overlying capsule noted, then splenectomy should be considered.



PATIENT

Kylie Rostadimas

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed female

AGE

13 years

WEIGHT

85 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Meghan Morse, LVT,
 CVT

HOSPITAL NAME

Animal General on the
 Hudson

REFERRING VET

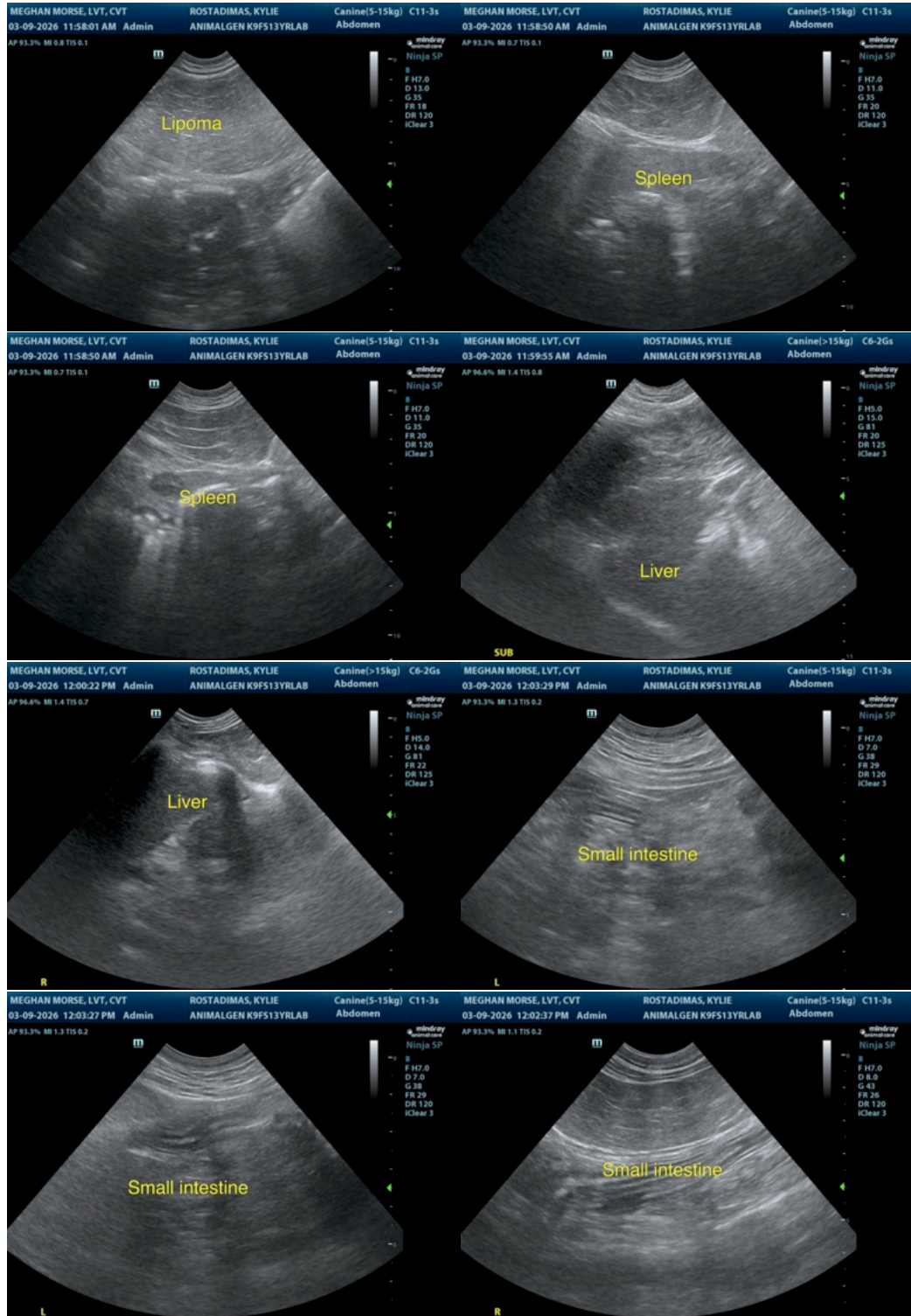
Dr. DiGiuseppi

INVOICE

72347

DATE

3/9/26





PATIENT

Kylie Rostadimas

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed female

AGE

13 years

WEIGHT

85 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Meghan Morse, LVT,
CVT

HOSPITAL NAME

Animal General on the
Hudson

REFERRING VET

Dr. DiGiuseppi

INVOICE

72347

DATE

3/9/26

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