



## PATIENT

Rosie Sawwow

## SPECIES

Canine

## BREED

Great Dane

## SEX

Spayed female

## AGE

6 years

## WEIGHT

102 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Shari Reffi, CVT

## HOSPITAL NAME

Newton VH

## REFERRING VET

Dr. Hipkin

## INVOICE

78191

## DATE

6/2/26

## PRESENTING CLINICAL SIGNS

History: Ventricular tachycardia, collapse episode, peripheral edema, grade IV/VI heart murmur, quiet. BCS 5/9

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder is full with a normal thickness and smooth appearance of the wall. A small amount of floating, hyperechogenic sediment.

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 8.7 cm, right measured 9.3 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.

### *Adrenal Glands*

The left adrenal gland is normal in shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 2.76 cm in length x 0.72 cm and 0.55 cm in width. The right adrenal gland was not visualized.

### *Spleen*

The spleen revealed a large, mottled echogenic, non-vascularized mass that measured 7.0 x 9.0 cm originating off the tail of the spleen. The rest of the spleen is of normal size (3.0 cm) maintaining a normal echogenic appearance, smooth homogenous parenchyma and a regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion of thrombosis evident.

### *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.



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## *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 pancreas was not visualized.

## *Free Abdomen*

Normal mesenteric lymph nodes.

A large amount of cellular ascites present.

## ULTRASONOGRAPHIC FINDINGS

- Splenic mass.
- Ascites.
- Urinary bladder sediment.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the splenic mass would be neoplasia with hematoma and granuloma an unlikely differential diagnosis.

The ascites would be consistent with hemoabdomen.

The most likely etiology for the urinary bladder sediment would be incidental debris with hematuria and bacterial cystitis a less likely differential diagnosis.

Further assessment would be three view thoracic radiographs and possibly FNA cytology of the splenic mass.

Splenectomy should be considered as it could be both diagnostics and therapeutic with further assessment dependent on an etiological diagnosis.



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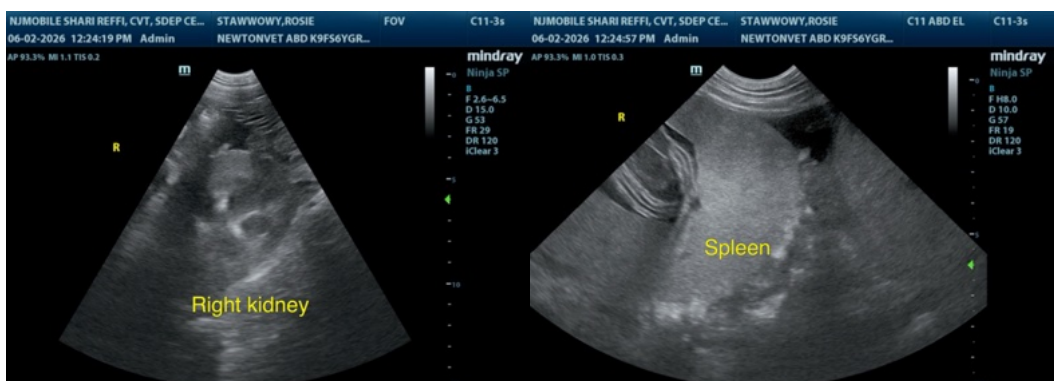
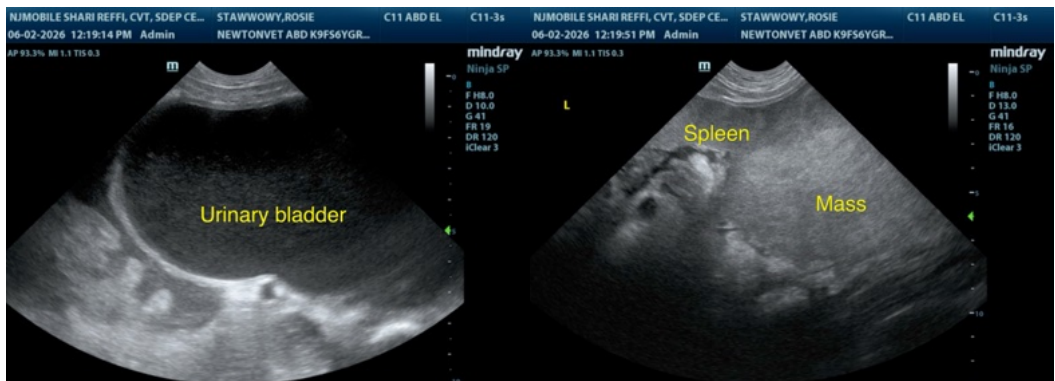
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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