



PATIENT PRESENTING CLINICAL SIGNS

Homeboy Kim History: Acute onset lethargy, hemorrhagic diarrhea, hyporexia.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

CBC: N/A.

BREED Serum Biochemistry: N/A.

Schnauzer Radiographic Findings: N/A.

SEX

Male

AGE

10 years

WEIGHT

10.2 #

INTERPRETED BY

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

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Small urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 0.9 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal capsule and pelvis.

Reproductive System

Small hypoechoic prostate (0.6 cm).

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 1.27 x 0.44 cm, right 1.19 x 0.37 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size with a diffuse coarse echogenic appearance, and some loss of portal markings. Small hypoechoic parenchymal nodule (0.87 cm) in the left caudal lobe. Small gall bladder containing normal anechoic bile. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, and colon with normal wall thickness, no loss of layering, or distension of the lumen. Large amount of ingesta within the small intestine. Fecal material within the colon.

IMAGING PERFORMED BY

Dr Paul Kim

HOSPITAL NAME

Ridgefield Park Animal
Hospital

REFERRING VET

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INVOICE

302612

DATE

10/25/21



PATIENT *Pancreas*

Homeboy Kim Normal size (1 cm and 1.1 cm) with a mottled echogenic to hyperechogenic appearance and an irregular capsule. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES

Canine *Free Abdomen*

BREED

Schnauzer

Mesenteric lymphadenomegaly (0.9 cm) with normal shape and echogenic appearance. Small amount acellular ascites.

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ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Pancreatic fibrosis vs pancreatitis.
- Hepatopathy.
- Hepatic nodule.
- Mesenteric lymphadenomegaly.
- Ascites.

Secondary findings:

- Age-related renal changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although the appearance of the pancreas may be indicative of pancreatic fibrosis, pancreatitis needs to be considered.

Etiologies for the hepatopathy would be reactive, vacuolar, metabolic, chronic hepatitis, early cirrhosis, early nodular regeneration, and infiltrative neoplasia.

Etiologies for the hepatic nodule would be nodular hyperplasia, granuloma, hematoma, abscess, and neoplasia.

Etiologies for the lymphadenomegaly would be reactive, lymphadenitis, and infiltrative neoplasia.

Further assessment would be fecal analysis, CBC, serum biochemistry, cPL/PSL assay, and possibly FNA cytology of the liver, hepatic nodule, and mesenteric lymph node.

Specific therapy would be dependent on an etiological diagnosis.

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PATIENT IMAGES

Homeboy Kim **Liver**

SPECIES

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INTERPRETED BY Pancreas

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Mesenteric lymph node



Small intestines



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.

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