



PATIENT PRESENTING CLINICAL SIGNS

PATIENT DeeDee Crucil
SPECIES Canine
BREED Maltese Mix
SEX FS
AGE 6 years
WEIGHT 9.6 kg

PRESENTING CLINICAL SIGNS
 History: Three-day duration anorexia, vomiting, lethargy.
 Physical Examination: Polypnea, dehydrated, abdominal discomfort, pyrexia.
 Urinalysis: N/A.
 CBC: Monocytosis, lymphopenia.
 Serum Biochemistry: Mildly elevated ALT and ALP activity. Abnormal cPL.
 Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Moderate amount of floating hyperechogenic sediment. No uroliths evident.

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

Normal iliac lymph nodes (1.6 cm). Ureters not visualized.

Normal renal size (left 4.9 cm, right 5.5 cm), echogenic appearance, cortico-medullary differentiation, blood flow, capsule and pelvis.

Adrenal Glands

Normal shape, size, echogenic appearance, and position. Left 1.89 x 0.41/0.4 cm, right 1.55 x 0.43/0.35 cm

Spleen

Normal size (1.8 cm) with a diffuse hyperechogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size with a diffuse increased echogenic appearance, and loss of portal markings. No nodules or masses evident. Small gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the pylorus, stomach, duodenum, small intestine, ileo-cecal junction, and colon with normal thickness (duodenum 0.5 cm, jejunum 0.34 cm, colon 0.2 cm), layering and peristaltic activity and no distension of the lumen.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Alastair Westcott,
DVM

HOSPITAL NAME

REFERRING VET

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DVM

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PATIENT *Pancreas*

DeeDee Crucil Enlarged (left 1.2 cm) with a diffuse hypoechogenic appearance. Irregular capsule. Visible pancreatic duct (0.16 cm). Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES

Canine *Free Abdomen*

BREED

Maltese Mix

Mesenteric lymphadenomegaly (up to 1.4 cm) with normal shape and echogenic appearance. No ascites.

SEX

FS

Primary Findings:

AGE

6 years

- Pancreatitis.
- Hepatopathy.
- Splenic pathology.
- Mesenteric lymphadenomegaly.

WEIGHT

9.6 kg

Secondary Findings:

- Urinary bladder sediment.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of pancreas is typical of pancreatitis.

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Etiologies for the hepatopathy would be reactive, vacuolar, metabolic, secondary to the pancreatitis, acute/chronic hepatitis, and infiltrative neoplasia.

Etiologies for the splenomegaly would be reactive, splenitis, and infiltrative neoplasia.

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

Although the urinary bladder sediment may be an incidental finding, bacterial cystitis, crystalluria, and hemorrhage needs to be considered.

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Further assessment would be urinalysis and FNA cytology of the liver, lymph nodes, and spleen.

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Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be fluid therapy as needed, nutritional support, anti-emetics (maropitant, metoclopramide), gastric protectants (omeprazole, sucralfate), and analgesics.

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PATIENT IMAGES

DeeDee Crucil **Liver**

SPECIES

Canine

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Maltese Mix

SEX

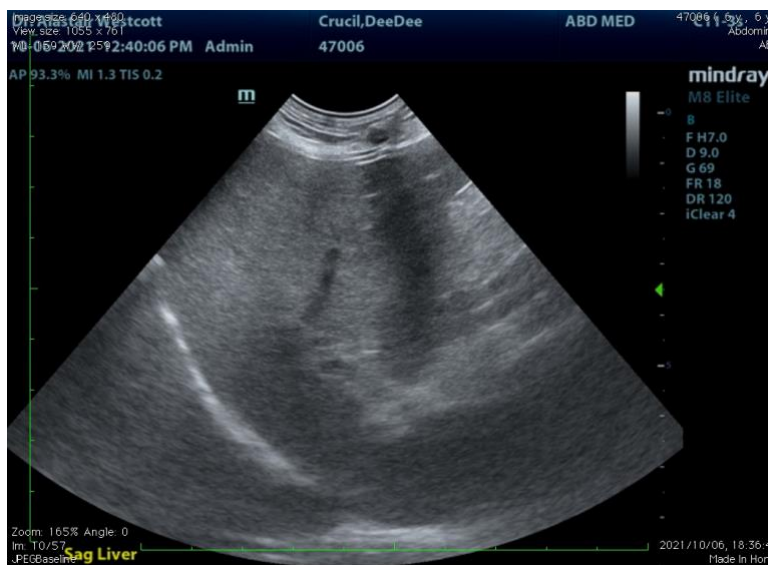
FS

AGE

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Pancreas

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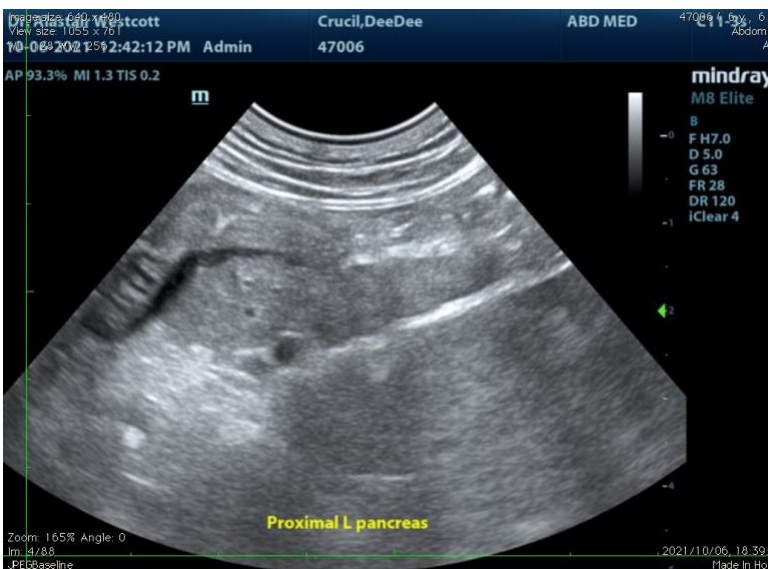
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PATIENT

Lymph nodes

DeeDee Crucil

SPECIES

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AGE

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Spleen



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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