



PATIENT

Sebastian Dawson

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

13 years

WEIGHT

5.9 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Dr Wassernab

INVOICE

302538

DATE

8/31/21

PRESENTING CLINICAL SIGNS

History: Anorexia past 4 days.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: Abnormal fPL.

Radiographic Findings: Normal thorax, cholecystolithiasis, ascites.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full 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 4.1 cm, right 4.2 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.56 cm, right 0.51 cm.

Spleen

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

Liver

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Single cholelith (1.5 cm). Normal appearance and thickness of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the pylorus, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering and normal wall thickness (duodenum 0.32 cm) and peristalsis, and no distension of the lumen.



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Pancreas

Enlarged and irregular (1.1 cm and 2.2 cm) with a diffuse hypoechoogenic appearance. Severe hyperechogenic appearance of the mesentery and fat surrounding the pancreas and in the cranial abdomen.

Free Abdomen

No mesenteric lymphadenomegaly.
Small amount of ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Pancreatitis.
- Ascites.

Secondary findings:

- Cholelith.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

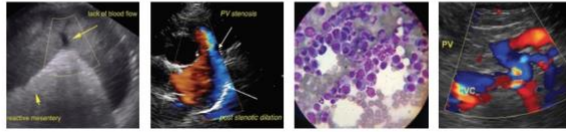
The appearance of the pancreas is typical for acute pancreatitis, with neoplasia a less likely differential diagnosis.

The ascites can be ascribed to the pancreatitis.

The cholelith can be considered an incidental finding as there is no evidence of obstruction of the bile duct or cholecystitis.

Further assessment would be FNA cytology of the pancreas. Ultrasound monitoring of the gall bladder for possible obstruction from the pancreatitis would also be indicated.

Management of the pancreatitis would be fluid therapy as needed, intestinal diet, analgesics, anti-emetics (maropitant, metoclopramide), gastric protectants (omeprazole), and possibly antibiotics.



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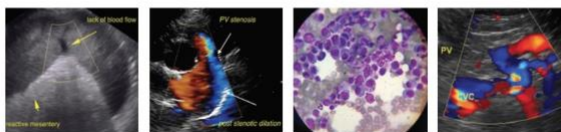
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IMAGES

Pancreas





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Gall bladder



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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)
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