



PATIENT

Pepper Hernandez

SPECIES

Canine

BREED

Fox Terrier Mix

SEX

FS

AGE

11Y, 5M

WEIGHT

11.6lbs

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Monika Salgado

HOSPITAL NAME

Westchester Animal
Hospital

REFERRING VET

Randy Dominguez

INVOICE

75235

DATE

6-1-26

PRESENTING CLINICAL SIGNS

Presented with a history of chronic pancreatitis and elevated liver enzymes and inappetence despite treatment.

Abnormal PE/Chem/CBC/UA Results: See uploaded documents

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The liver presents mild generalized enlargement with uniform parenchymal attenuation. No focal hepatic masses identified. The gallbladder is moderately distended. Mild cystic duct dilation is seen. There also is mild dilation of the extrahepatic biliary system. The common bile duct is moderately dilated reaching a maximal diameter of approximately 10mm over a distance of 20mm before tapering to a normal diameter near the major duodenal papilla. No obstructive lesion, cholelith, mural mass, or extramural compressive process can be identified. The intrahepatic bile ducts are not significantly dilated.

The pancreas presents moderate diffuse enlargement with mild regional mesenteric fat stranding.

Mild diffuse gastric wall thickening is noted.

Multiple mild lymphadenomegaly is present within the epigastrium.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild diffuse pancreatic enlargement with regional fat stranding consistent with active or chronic active pancreatitis.
- Mild gastritis and proximal duodenitis.
- Mild hepatomegaly.
- Mild extrahepatic biliary duct dilation and moderate common bile duct dilation without evidence of obstruction.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The pancreatic changes are compatible with chronic pancreatitis with possible active inflammatory change.

The biliary findings suggest impaired gallbladder emptying though no mechanical obstruction can be identified. Transient or chronic inflammatory changes of the pancreaticoduodenal region may result in functional or partial obstruction of the common bile duct. Additionally, chronic biliary tract remodeling and cholangiohepatitis or other chronic hepatobiliary disease are possible underlying causes.

Correlation with the laboratory changes and serial monitoring of the common bile duct in case of



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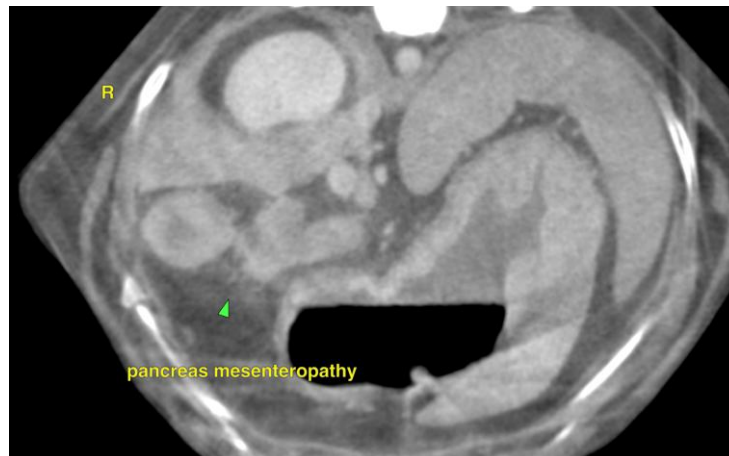
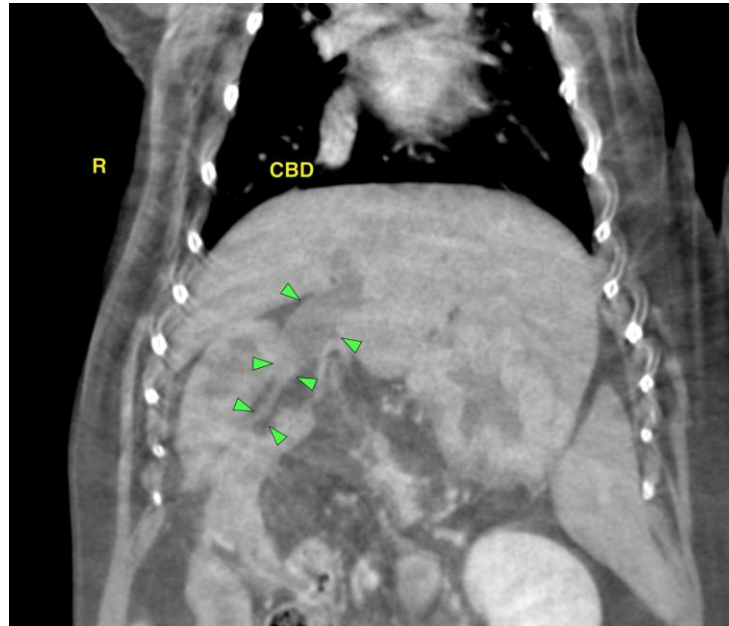
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elevating cholestatic enzymes are recommended. Continued management and monitoring of chronic pancreatitis is recommended.



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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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