



PATIENT

Riley Williamson

SPECIES

Canine

BREED

Cavalier King Charles
Spaniel

SEX

Male

AGE

13 years

WEIGHT

11.5 kg

INTERPRETED BY

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

**IMAGING PERFORMED
BY**

Lisa Bancroft, DVM

HOSPITAL NAME

Treasure Coast Animal
Emergency

REFERRING VET

Dr Angela Cail

INVOICE

303740

DATE

1/7/22

PRESENTING CLINICAL SIGNS

History: Hemorrhagic enteritis.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A

Serum Biochemistry: Elevated cPL.

Radiographic Findings: N/A.

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 proximal urethra (0.4 cm) and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.4 cm, right 5.1 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

Prostamegaly (2.7 cm) with a diffuse hyperechogenic appearance and regular capsule. Normal appearance of the peri-prostatic tissue. Normal size and echogenic appearance of the testicles (left 1.7 x 2.4 cm, right 1.5 x 2.8 cm). Small hypoechoic parenchymal nodule (0.7 cm) in the right testicle.

Adrenal Glands

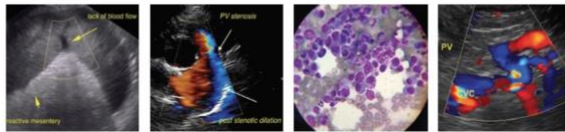
Normal shape, echogenic appearance, position, and size. Left 0.59/0.53 cm, right 0.52/0.56 cm. Small hyperechogenic nodule (0.3 cm) in the caudal pole of the left gland.

Spleen

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

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness (0.2 cm) and echogenic appearance of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.39 cm, jejunum 0.45 cm, colon 0.28 cm) and peristalsis, and no distension of the lumen.

Pancreas

Normal size (1.3 cm) with a diffuse hyperechogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Pancreatic fibrosis.
- Prostategaly.
- Left adrenal nodule.

Secondary findings:

- Gall bladder sediment.
- Age-related renal changes.
- Right testicle nodule.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although the appearance of the pancreas is typical for fibrosis, with the elevated cPL, chronic pancreatitis needs to be considered.

The appearance of the prostate is consistent with benign prostatic hyperplasia and in line with the age and intact nature of the patient.

The most likely etiology for the left adrenal nodule would be functional/non-functional adenoma.

Further assessment that could be considered would urinalysis and adrenal function testing, the latter if there are clinical signs and/or serum biochemistry changes indicative of Cushing's disease.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be low-fat intestinal diet and possibly ursodiol for the gall bladder sediment.



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IMAGES

Pancreas



Left adrenal





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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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