



PATIENT PRESENTING CLINICAL SIGNS

Harold Hanson History: Asymptomatic. Hypercalcemia and elevated liver enzymes on pre-anesthetic bloods.
SPECIES Physical Examination: Skin nodules, thin skin on ventral abdomen.
 Canine Urinalysis: SG 1.024.
BREED CBC: No significant abnormalities.
 Chihuahua Serum Biochemistry: Hypercalcemia, elevated ALT activity, marked elevated ALP activity.
 Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

MN *Urinary System*

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

WEIGHT Normal trigone area, proximal urethra (0.4 cm), and iliac blood vessels.

14.4 # Normal iliac lymph nodes. Ureters not visualized.

Normal renal size, echogenic appearance, cortico-medullary differentiation, blood flow, pelvis, and capsule.

INTERPRETED BY *Reproductive System*

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

Adrenal Glands

IMAGING PERFORMED BY

Karen Fowler, DVM Left – normal position, echogenic appearance, shape, and size.

Right – normal position and echogenic appearance but rounded in shape and plump in size.

HOSPITAL NAME *Spleen*

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

REFERRING VET *Liver*

Melinda Wood

INVOICE Enlarged with rounded edges, increased echogenic appearance, some loss of portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.
 303884

DATE *Gastrointestinal*

2/11/23 Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen.

**PATIENT*****Pancreas***

Harold Hanson

Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES***Free Abdomen***

Canine

Normal mesenteric lymph nodes.
No ascites.

BREED

Chihuahua

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

SEX

- Hepatopathy.
- Right adrenomegaly.

MN**Age**

Secondary Findings:

8 years

- None.

WEIGHT

14.4 #

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**INTERPRETED BY**

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

Etiologies for the liver would be reactive, vacuolar, hyperplasia, metabolic, and chronic hepatitis, with infiltrative neoplasia, a less likely differential diagnosis.

Etiologies for the right adrenal gland would be incidental finding, disease stress, and Cushing's disease.

On this ultrasound there is no obvious evidence for the hypocalcemia such as lymphadenomegaly, intestinal thickening, nodules, or masses.

IMAGING PERFORMED BY

Karen Fowler, DVM

Further assessment would be rectal palpation of the anal glands, survey thoracic radiographs, adrenal function testing (ACTH stimulation/LDDS test), PTH assay, and FNA cytology of the skin nodules and liver.

HOSPITAL NAME

Portland Veterinary
Wellness Center

Specific therapy would be dependent on an etiological diagnosis.

REFERRING VET

Melinda Wood

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PATIENT

Harold Hanson

SPECIES

Canine

BREED

Chihuahua

SEX

MN

Age

8 years

WEIGHT

14.4 #

INTERPRETED BY

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 MMedVet (Med), PhD, Dipl.
 ECVIM

IMAGING PERFORMED BY

Karen Fowler, DVM

HOSPITAL NAME

Portland Veterinary
 Wellness Center

REFERRING VET

Melinda Wood

INVOICE

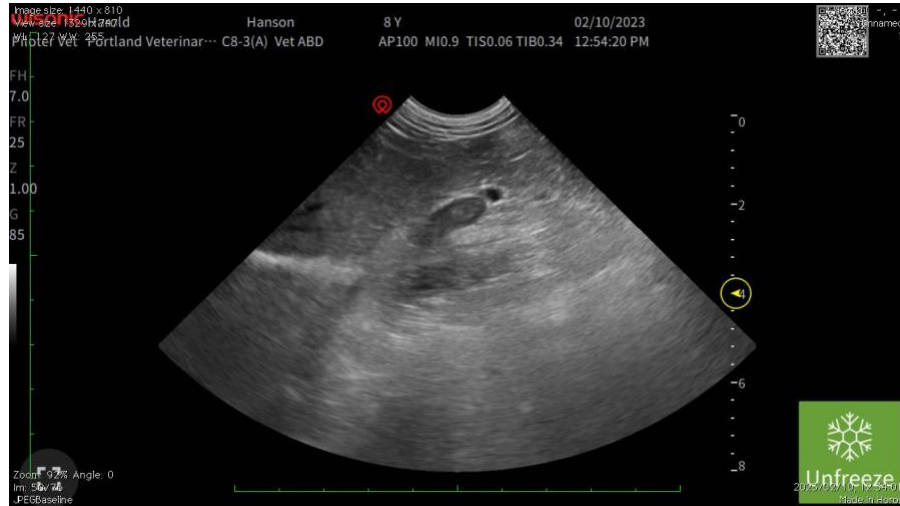
303884

DATE

2/11/23

IMAGES

Right adrenal



Liver



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)
rlobetti@mweb.co.za