



PATIENT

Chloe Stroeder

SPECIES

Canine

BREED

Labrador

SEX

FS

AGE

10 years

WEIGHT

33 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Goeres

HOSPITAL NAME

Kelowna Veterinary
Hospital

REFERRING VET

Dr Goeres

INVOICE

303896

DATE

2/14/23

PRESENTING CLINICAL SIGNS

History: 1 week of lethargy, poor appetite, and icterus.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: Severely elevated liver enzyme activity, bilirubin, cholesterol, and lipase.

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 trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 7.8 cm, right 6.8 cm), echogenic appearance cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, position, and size.

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 moderate amount of hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.



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Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.56 cm) and peristaltic activity, and no distension of the lumen.

Pancreas

Enlarged with a hypoechogenic appearance and irregular capsule. One lobe of the pancreas has a mottled echogenic mass-like appearance. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Pancreatitis.
- Pancreatic mass.

Secondary findings:

- Gall bladder sediment.

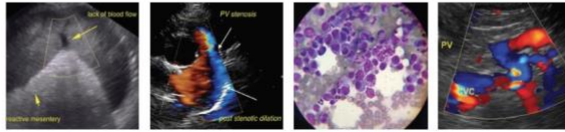
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS IMAGES

The general appearance of the pancreas is consistent with pancreatitis; with etiologies for the mass being severe pancreatitis, granuloma formation, abscessation, and neoplasia.

With the full gall bladder, severely elevated liver enzyme activity and bilirubin, and the appearance of the pancreas, partial bile obstruction needs to be considered.

Further assessment would be 3-view thoracic radiographs, FNA cytology of the pancreas and mass, and possibly a CT scan. Tru-cut/wedge biopsy of the mass may be required for a final etiological diagnosis.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be fluid therapy as needed, low-fat intestinal diet, analgesics (opioid and/or NSAIDs), and anti-emetics.



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IMAGES

Pancreas



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