



**PATIENT PRESENTING CLINICAL SIGNS**

Molly Mann History: Elevated liver enzymes. On Denamarin.

**SPECIES** Physical Examination: N/A.

Canine Urinalysis: N/A

CBC: N/A.

**BREED** Serum Biochemistry: Elevated liver enzyme activity.

Shih Tzu Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

FS **Urinary System**

**Age** Empty urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

5 years

**WEIGHT** Normal trigone area, proximal urethra (0.3 cm), and iliac blood vessels.

11.5 # Normal iliac lymph nodes (1.3 cm). Ureters not visualized.

Normal renal size (left 3.6 cm, right 3.5 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

**INTERPRETED BY** **Reproductive System**

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

**Adrenal Glands**

**IMAGING PERFORMED BY**

Sonya Myers, DVM Normal position, echogenic appearance, shape, and size. Left 0.48/0.58 cm, right 0.58 cm. Hyperechogenic parenchymal nodule (0.8 x 0.8 cm) in the cranial pole of the right gland.

**HOSPITAL NAME** **Spleen**

VCA Clermont Animal Hospital Normal size (0.9 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

**REFERRING VET** **Liver**

Dr Blosssey Enlarged with rounded edges with normal echogenic appearance, portal markings, and regular curvilinear capsule. FNA taken with no obvious post aspirate hemorrhage. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.2 cm).

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**DATE** **Gastrointestinal**

2/14/23 Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.42 cm, duodenum 0.42 cm, jejunum 0.28 cm, colon 0.15 cm) and peristaltic activity, and no distension of the lumen.



**PATIENT** *Pancreas*

Molly Mann Normal size (right 1.1 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Canine Normal mesenteric lymph nodes (1.9 cm).  
No ascites.

**BREED**

Shih Tzu **ULTRASONOGRAPHIC FINDINGS**

**SEX** Primary Findings:

- Hepatopathy.
- Right adrenal nodule.

**Age** Secondary Findings:

- Age-related renal changes.

**WEIGHT**

11.5 #

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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MMedVet (Med), PhD, Dipl.  
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Etiologies for the hepatopathy would be reactive, vacuolar, metabolic, hyperplasia, hepatitis, granulomatous disease, and infiltrative neoplasia.

Although the right adrenal nodule is most likely an incidental non-functional adenoma, functional adenoma and emerging carcinoma needs to be considered.

Further assessment needs to be based on the pending cytology results but could include adrenal function testing (ACTH stimulation/LDDS test) and Tru-Cut/wedge biopsy of the liver.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be to continue with the Denamarin and to add ursodiol.

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

VCA Clermont Animal  
Hospital

**REFERRING VET**

Dr Blosssey

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**DATE**

2/14/23



**PATIENT IMAGES**

Molly Mann

**Liver**

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

FS

**Age**

5 years

**WEIGHT**

11.5 #



**Right adrenal gland**



**INTERPRETED BY**

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 MMedVet (Med), PhD, Dipl.  
 ECVIM

**IMAGING PERFORMED BY**

Sonya Myers, DVM

**HOSPITAL NAME**

VCA Clermont Animal  
 Hospital

**REFERRING VET**

Dr Blossley

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**DATE**

2/14/23

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.

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