



PATIENT

Godiva Kruzan

SPECIES

Canine

BREED

Doodle

SEX

FS

AGE

13 years

WEIGHT

62 #

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Sonya Myers, DVM

HOSPITAL NAME

Planet Pet Animal
Hospital

REFERRING VET

Dr Witte

INVOICE

302822

DATE

3/18/22

PRESENTING CLINICAL SIGNS

History: Previous pancreatitis. Diarrhea few weeks ago, which improved with symptomatic therapy but now showing vomiting and anorexia.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

Radiographic Findings: Possible abdominal mass.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

Normal trigone area, proximal urethra (0.5 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 6.5 cm, right 6.1 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

N/A.

Adrenal Glands

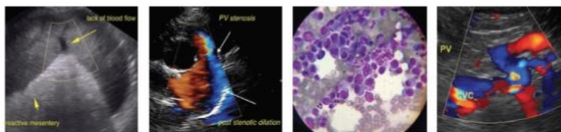
Normal shape, echogenic appearance, size, and position. Left 0.59/0.53 cm, right 0.71 cm.

Spleen

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

Liver

Normal size with a hyperechogenic and coarse echogenic appearance, and some loss of portal markings. 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.



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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 0.44 cm, duodenum 0.49 cm, jejunum 0.31 cm) and peristalsis, and no distension of the lumen. Ingesta filled small intestine.

Pancreas

Enlarged (right 1.7 cm) with a diffuse hypoechoogenic appearance. Irregular capsule. Visible pancreatic duct. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly (1.6 cm).
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Pancreatitis.
- Hepatopathy.

Secondary findings:

- Age-related renal changes.

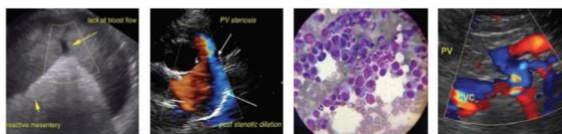
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the pancreas is indicative of chronic-active pancreatitis.

Etiologies for the hepatopathy would be secondary to the pancreatitis, vacuolar, reactive, chronic hepatitis, early cirrhosis, and early nodular regeneration; with infiltrative neoplasia, a far less likely differential diagnosis.

Further assessment would be cPL/PSL assay, liver function (liver enzymes, albumin, bilirubin, bile acids), and FNA cytology of the liver.

Further specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be low-fat intestinal diet, analgesics, ursodiol, and gastric protectants (omeprazole, sucralfate).



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IMAGES

Liver



Pancreas



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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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