

PATIENT

Jackson Sesack

SPECIES

Canine

BREED

Westie

SEX

MN

AGE

11 years

WEIGHT

6.1 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Brent Crutchfield,
DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Dr Cail

INVOICE

302737

DATE

2/9/22

PRESENTING CLINICAL SIGNS

History: Pyrexia, possible Addison's disease, vomiting. Minimal response to symptomatic therapy.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal appearance and thickness of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4.1 cm, right 3.5 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

Reproductive System

Small hypoechogenic prostate.

Adrenal Glands

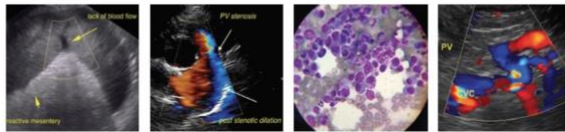
Normal shape, echogenic appearance, size, and position. Left 0.39 cm, right 0.53 cm.

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 diffuse hyperechogenic and nodular appearance, and some loss of portal markings. Nodules are faint, hypoechogenic, and parenchymal. 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 (jejunum 0.32 cm) and peristalsis, and no distension of the lumen.

Pancreas

Normal size and echogenic 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:

- Nodular hepatopathy.
- Age-related renal changes vs chronic kidney disease.

Secondary findings:

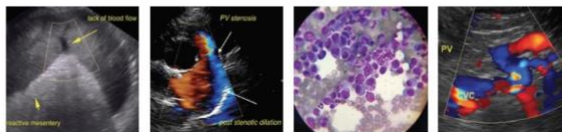
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the nodular hepatopathy would be reactive, metabolic, nodular regeneration, chronic hepatitis, early cirrhosis, granulomatous disease, and neoplasia.

Further assessment needs to be based on the pending urinalysis, urine culture, and blood work but could include FNA cytology of the liver; however, a Tru-cut or wedge biopsy may be required for a final etiological diagnosis

Specific therapy would be dependent on an etiological diagnosis.



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IMAGES

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.

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