



PATIENT PRESENTING CLINICAL SIGNS

Bauer O'Callaghan History: Chronic pancreatitis with episodic vomiting that occurs overnight or in the morning.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A.

Previous CBC: Band neutrophilia.

BREED Previous Serum Biochemistry: Mildly elevated ALT activity. Abnormal cPL.

Terrier Mix Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Female

Urinary System

AGE

9 years

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

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

13.5 # Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3.9 cm, right 4.6 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal capsule and pelvis.

INTERPRETED BY **Reproductive System**

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

N/A.

IMAGING PERFORMED BY **Adrenal Glands**

Amy Mayhew, LVT

Normal shape, echogenic appearance, and position but plump in size. Left 0.42/0.41 cm, right 0.46/0.4 cm.

HOSPITAL NAME **Spleen**

SVS Imaging CT

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

REFERRING VET **Liver**

Dearborn Family Pet Care

Normal size, echogenic appearance, and portal markings. Irregular parenchymal hyperechogenic non-vascularized nodules in the left lobe. Full gall bladder containing large amount of hyperechogenic adherent and non-adherent sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

INVOICE **Gastrointestinal**

302854

DATE

3/31/22

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*

Bauer O'Callaghan Enlarged with a diffuse mottled echogenic appearance and an irregular capsule. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine No mesenteric lymphadenomegaly.
No ascites.

BREED

Terrier Mix

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Pancreatitis.
- Focal nodular hepatopathy.
- Gall bladder sediment.

SEX

Female

AGE

9 years

Secondary Findings:

- Age-related renal changes.

WEIGHT

13.5 #

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the pancreas is consistent with chronic pancreatitis.

Etiologies for the focal nodular hepatopathy would be granulomas, organized abscessation or hematomas, and focal nodular regeneration.

Further assessment would be cPL/PSL assay, liver enzyme activity, and FNA cytology of the left liver lobe.

Specific therapy would be dependent on an etiological diagnosis. Management of the pancreatitis would be low-fat intestinal diet, analgesics as needed, and anti-emetics. Ursodiol can be considered for the gall bladder.

INTERPRETED BY

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IMAGING PERFORMED BY

Amy Mayhew, LVT

HOSPITAL NAME

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REFERRING VET

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PATIENT IMAGES

Bauer O'Callaghan **Liver**

SPECIES

Canine

BREED

Terrier Mix

SEX

Female

AGE

9 years

WEIGHT

13.5 #

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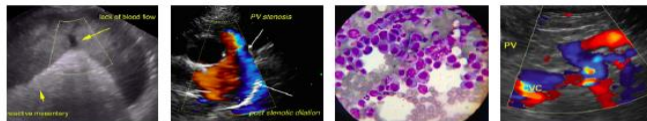
DATE

3/31/22



Gall bladder





PATIENT Pancreas

Bauer O'Callaghan

SPECIES

Canine

BREED

Terrier Mix

SEX

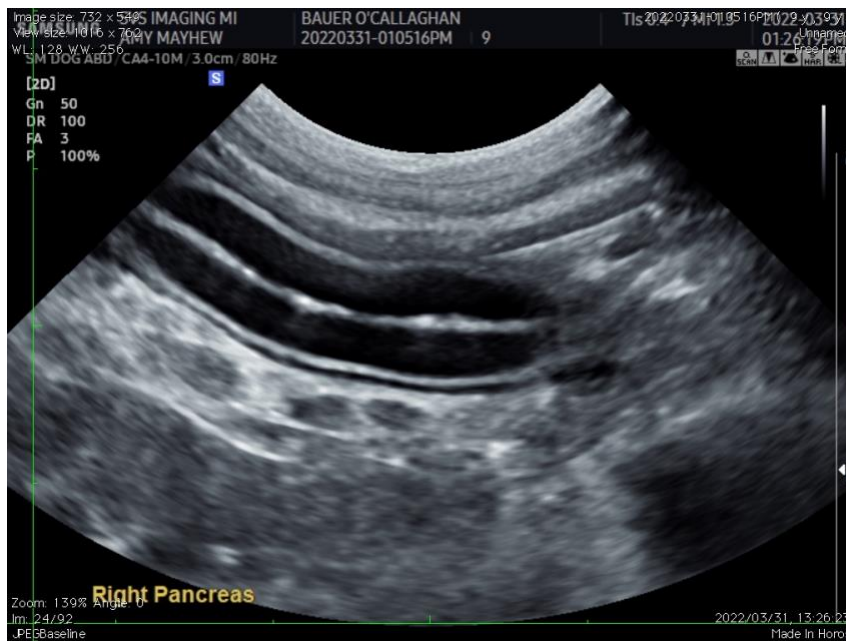
Female

AGE

9 years

WEIGHT

13.5 #



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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.

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