



PATIENT

Jack Eastwood

SPECIES

Canine

BREED

Feline

SEX

MN

AGE

14 years

WEIGHT

3½ 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 Mueller

INVOICE

302853

DATE

3/31/22

PRESENTING CLINICAL SIGNS

History: 1-week duration anorexia and lethargy. Hyperthyroidism – on methimazole.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: Neutrophilia.

Serum Biochemistry: Elevated liver enzyme activity, bilirubin, and urea.

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 hyperechogenic floating sediment. No uroliths evident.

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4.2 cm, right 3.9 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, and position. Bilaterally enlarged – left 0.57 cm, right 0.9 cm.

Spleen

Normal size (0.7 cm) and echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance and 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 (jejunum 0.2 cm) and peristalsis, and no distension of the lumen.

Pancreas

Normal size and echogenic appearance. Regular capsule. Focal mottled echogenic parenchymal nodule (0.8 cm) in the right lobe with distortion of the overlying capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Bilateral adrenomegaly.
- Pancreatic nodule.

Secondary findings:

- Age-related renal disease.
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the adrenal hyperplasia, functional or non-functional adrenal neoplasia, and pituitary-dependent Cushing's disease.

Etiologies for the pancreatic nodule would be adenoma, neoplasia, granuloma, and resolved abscess.

Further assessment would be urinalysis, serum potassium, fPL/PSL assay, blood pressure, aldosterone assay, ACTH stimulation test, and FNA cytology of the pancreatic nodule and adrenal glands.

Specific therapy would be dependent on an etiological diagnosis.



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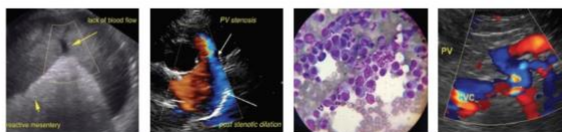
IMAGES

Right adrenal



Left adrenal





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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)
 rlobetti@mweb.co.za