



**PATIENT PRESENTING CLINICAL SIGNS**

**Duke Gottlieb** History: Diagnosed and treated for pancreatitis. Current therapy – metronidazole, Cerenia, and Provable

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

Canine Urinalysis: Pending.

**BREED** CBC: Pending.

Cockapoo Serum Biochemistry: Pending.

Radiographic Findings: N/A.

**SEX**

MN

**AGE**

9½ years

**WEIGHT**

25.5 #

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

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

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 5.3 cm, right 5.1 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis, blood flow, and capsule.

**Reproductive System**

Small hypoechogenic prostate.

**Adrenal Glands**

Left – normal shape, echogenic appearance, position, and size. 2.09 x 0.65/0.52 cm.

Right – normal position, echogenic appearance, and size (1.93 x 0.49 cm) with a hyperechogenic nodule in the cranial pole (1.01 cm).

**Spleen**

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted. 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 small amount of non-adherent hyperechogenic sediment. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

**IMAGING PERFORMED BY**

Jessica Miller

**HOSPITAL NAME**

Dr Brenda King  
Veterinary

**REFERRING VET**

Dr King

**INVOICE**

302923

**DATE**

4/20/22



**PATIENT** *Gastrointestinal*

Duke Gottlieb 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.

**SPECIES** *Pancreas*

Canine Normal size with a diffuse hyperechogenic appearance and irregular capsule. Visible pancreatic duct. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**BREED** *Free Abdomen*

Cockapoo No mesenteric lymphadenomegaly.  
No ascites.

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**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Pancreatitis.
- Nodule right adrenal gland.

Secondary Findings:

- Gall bladder sediment.
- Age-related renal changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The appearance of the pancreas is typical for chronic pancreatitis.

Etiologies for the right adrenal nodule would be an incidental non-functional adenoma, functional adenoma, emerging carcinoma (functional or non-functional) and emerging pheochromocytoma.

Although the gall bladder sediment is most likely an incidental finding, an emerging mucocele needs to be considered.

Further assessment needs to be based on the pending blood results but could include cPL/PSL assay, FNA cytology of the adrenal nodule, adrenal function testing (ACTH stimulation/LDDS test), blood pressure, and possibly catecholamine assay.

Specific therapy would be dependent on an etiological diagnosis.



**PATIENT IMAGES**

Duke Gottlieb **Right adrenal**

**SPECIES**

Canine

**BREED**

Cockapoo

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**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.

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