



PATIENT

Fritzi Tunick

SPECIES

Canine

BREED

Dachshund

SEX

MN

AGE

11 years

WEIGHT

6.1 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Angela Cail

INVOICE

304205

DATE

5/10/23

PRESENTING CLINICAL SIGNS

History: N/A.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: Hypercalcemia.

Radiographic Findings: N/A.

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 evident. Small uroliths (0.8 cm) present.

Normal trigone area, proximal urethra (0.2 cm), and iliac blood vessels. Small lith (0.4 cm) in the proximal urethra.

Normal iliac lymph nodes. Ureters not visualized.

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

Reproductive System

Small hypoechoic prostate (0.6 cm).

Adrenal Glands

Normal echogenic appearance, position, and size but with a rounded shape. Left 0.58 cm.

Spleen

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

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident.

Gall bladder

Full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal bile duct.



PATIENT

Fritzi Tunick

SPECIES

Canine

BREED

Dachshund

SEX

MN

AGE

11 years

WEIGHT

6.1 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Angela Cail

INVOICE

304205

DATE

5/10/23

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, 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:

- Uroliths.
- Plump adrenal glands.

Secondary findings:

- Age-related renal disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the adrenal glands would be disease stress and emerging pituitary-dependent Cushing's disease.

No obvious etiology for the hypercalcemia evident on this ultrasound.

Further assessment would be urinalysis, urine culture, PTH and PTHrP assay, and if there are compatible clinical and biochemical signs of Cushing's disease, adrenal function testing (ACTH stimulation/LDDS test).

Specific therapy would be dependent on an etiological diagnosis.



PATIENT

Fritzi Tunick

SPECIES

Canine

BREED

Dachshund

SEX

MN

AGE

11 years

WEIGHT

6.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast
 Animal Emergency

REFERRING VET

Angela Cail

INVOICE

304205

DATE

5/10/23

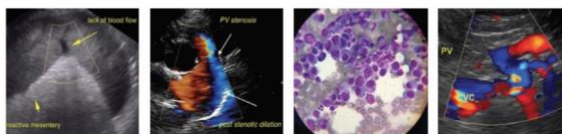
IMAGES

Left adrenal



Right adrenal





PATIENT

Fritzi Tunick

SPECIES

Canine

BREED

Dachshund

SEX

MN

AGE

11 years

WEIGHT

6.1 kg

Urinary bladder



Urethra



INTERPRETED BY

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

IMAGING PERFORMED BY

Seth Mitchell, DVM

HOSPITAL NAME

Treasure Coast
 Animal Emergency

REFERRING VET

Angela Cail

INVOICE

304205

DATE

5/10/23

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)
 remo.lobetti@sonopath.com