

**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Chet Baker Whitman History: Lethargy, hyporexia. Left adrenal mass on previous ultrasound (May 2022). Previous history of suspected IVDD.

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

Urinalysis: N/A.

**BREED** Chihuahua CBC: Normal.

Serum Biochemistry: Elevated ALP activity.

**SEX** MN Radiographic Findings: Normal.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**AGE** *Urinary System*

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

**WEIGHT** 12.5 # Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

**INTERPRETED BY** Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM Normal renal size (left 3.5 cm, right 4.4 cm), with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

**Reproductive System**

Small hypoechogenic prostate (0.8 cm)

**IMAGING PERFORMED BY** Denise Bruno LVT, RDMS **Adrenal Glands**

Left adrenal – large irregular mottled echogenic mass (2 x 3.1 cm) with infiltration into the caudal vena cava.

Right adrenal – normal shape, echogenic appearance, position, and size (1.44 x 0.65/0.64 cm).

**HOSPITAL NAME** Brooklyn Heights Veterinary Hospital **Spleen**

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

**INVOICE** *Liver*

303148 Enlarged with rounded edges, increased echogenic appearance, some loss of portal markings, and regular curvilinear capsule. Focal hypoechogenic parenchymal nodule (1.3 x 1.8 cm) in the right lateral lobe. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct.

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**PATIENT** *Gastrointestinal*

Chet Baker Whitman Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (small intestine – up to 0.46 cm) and peristalsis, and no distension of the lumen.

**SPECIES**

Canine

*Pancreas*

**BREED**

Chihuahua

Normal size and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

*Free Abdomen*

**SEX**

No mesenteric lymphadenomegaly.

**MN**

Small amount of acellular ascites around the left kidney.

**AGE**

Hyperechogenic thrombus (1.2 x 4.5 cm) in the caudal vena cava in the region of the right adrenal gland.

16 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

Primary findings:

12.5 #

- Left adrenal mass.
- Thrombus in the caudal vena cava
- Focal ascites.
- Hepatopathy.
- Hepatic nodule.

**INTERPRETED BY**

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

Secondary findings:

- Age-related renal changes.

**IMAGING PERFORMED BY**

Denise Bruno LVT, RDMS

**HOSPITAL NAME**

Brooklyn Heights  
Veterinary Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The appearance of the adrenal mass is consistent with an invasive neoplasia – either non-functional carcinoma or pheochromocytoma with an associated thrombus in the caudal vena cava and focal ascites. Both the mass and the thrombus are similar in size as on the previous ultrasound, 2.1 x 3.2 cm and 1.1 x 3.4, respectively.

**REFERRING VET**

Dr Venezia

Etiologies for the hepatopathy would be age-related, vacuolar, metabolic, early cirrhosis, chronic hepatitis, and infiltrative neoplasia.

Etiologies for the hepatic nodule be nodular hyperplasia, granuloma, organized hematoma or abscess, and neoplasia.

**INVOICE**

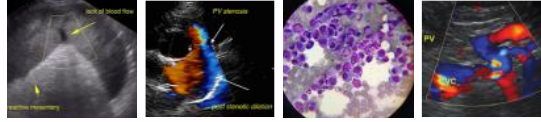
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Further assessment would be urine and urine catecholamine assay, blood pressure, and possibly FNA cytology of the liver and adrenal mass. If surgery is being contemplated, then CT scan would be indicated.

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Specific therapy would be dependent on an etiological diagnosis.



**PATIENT IMAGES**

Chet Baker Whitman **Left adrenal**

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

MN

**AGE**

16 years

**WEIGHT**

12.5 #

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**HOSPITAL NAME**

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**REFERRING VET**

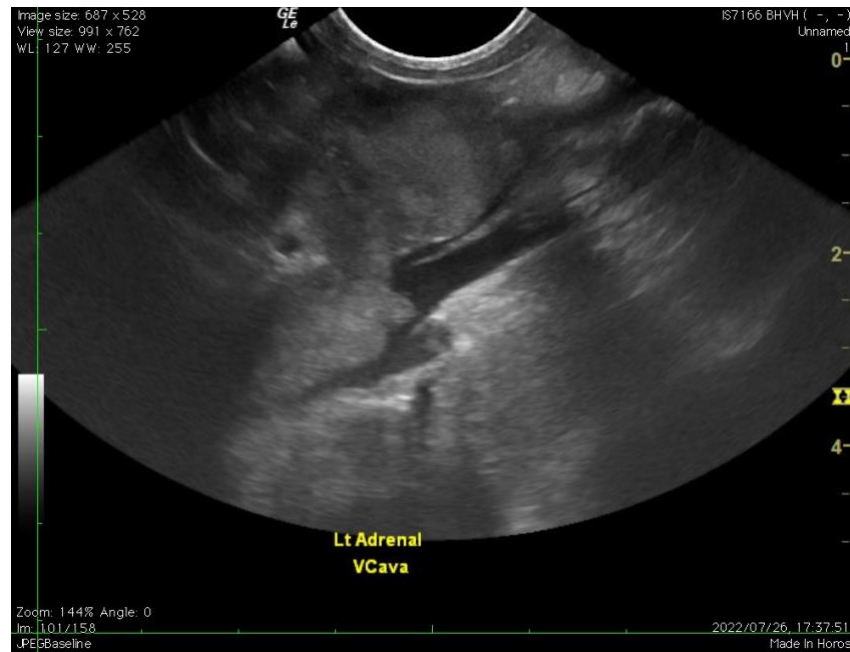
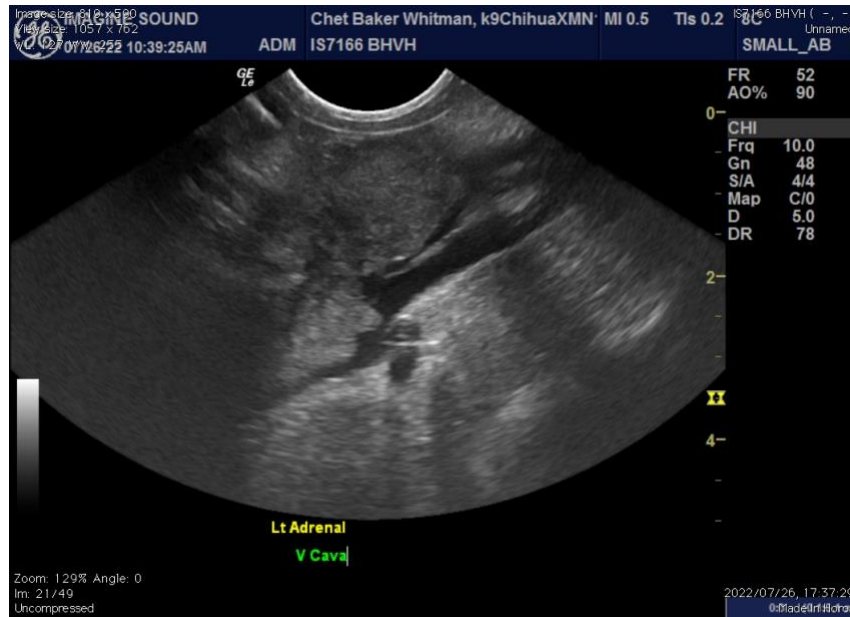
Dr Venezia

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**DATE**

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**PATIENT Caudal vena cava**

Chet Baker Whitman

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

MN

**AGE**

16 years

**WEIGHT**

12.5 #

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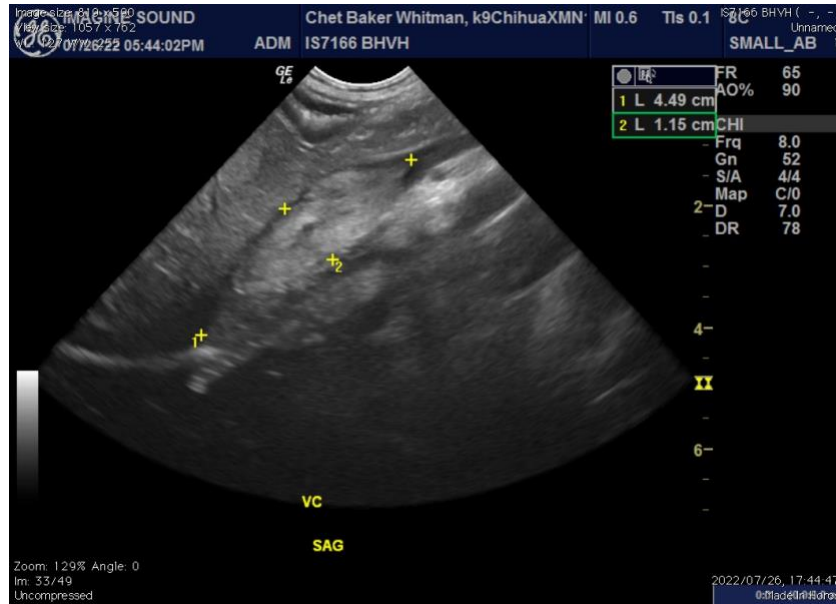
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**INVOICE**

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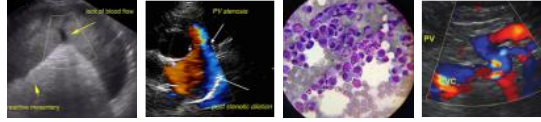
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**Liver**





**PATIENT Liver nodule**

Chet Baker Whitman

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

MN

**AGE**

16 years

**WEIGHT**

12.5 #



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MMedVet (Med), PhD, Dipl.  
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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.

**IMAGING PERFORMED BY**

Denise Bruno LVT, RDMS

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**HOSPITAL NAME**

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Veterinary Hospital

**REFERRING VET**

Dr Venezia

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