



PATIENT PRESENTING CLINICAL SIGNS

Oreo Saicuzza History: DKA, AKI, suspected pancreatitis.

SPECIES Physical Examination: N/A.

Canine Urinalysis: Suspected bacteruria.

BREED CBC: Thrombocytosis.

Shih Tzu Serum Biochemistry: N/A.

Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

FS *Urinary System*

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

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

Normal iliac lymph nodes (1.6 cm). Ureters not visualized.

Renomegaly (left 5.5 cm right 6 cm) with increased echogenic appearance, loss of cortico-medullary differentiation, and normal capsule. Bilateral pyelectasia – left 0.5 cm, right 0.3 cm.

INTERPRETED BY *Reproductive System*

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

Adrenal Glands

IMAGING PERFORMED BY Normal shape, echogenic appearance, size, and position. Left 0.68/0.55 cm, right 0.81/0.4 cm. Hyperechogenic nodule (0.8 x 0.9 cm) in the caudal pole of the right adrenal.

Sonya Myers, DVM

HOSPITAL NAME *Spleen*

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

REFERRING VET *Liver*

Dr Rivera Enlarged with rounded edges and normal echogenic appearance, portal markings and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.3 cm).

INVOICE *Gastrointestinal*

303188

DATE Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.41 cm, jejunum 0.27 cm) and peristaltic activity, and no distension of the lumen. Fluid distended stomach.

8/11/22



PATIENT *Pancreas*

Oreo Saicuzza Enlarged (1.3 x 4.2 cm) and irregular with a hypoechogenic appearance. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine Normal mesenteric lymph nodes (1.2 cm).
Small amount ascites in the cranial abdomen.

BREED

Shih Tzu

ULTRASONOGRAPHIC FINDINGS

SEX

Primary Findings:

FS

Age

8 years

- Pancreatitis.
- Renal disease.
- Hepatopathy.
- Adrenal nodule.

WEIGHT

Secondary Findings:

- Fluid distended stomach.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the pancreas is typical for acute pancreatitis with associated localized peritonitis and hepatopathy, the latter also secondary to the diabetes.

Etiologies for the renal disease would be acute kidney injury, bacterial nephritis, and pyelonephritis.

The adrenal nodule is most likely an incidental non-functional adenoma but needs to be monitored for possible functional adenoma and emerging carcinoma.

Further assessment would be urine culture and cPL/PSL assay.

Management would be fluid therapy, correction of electrolyte anomalies (if present), opioid analgesics, insulin, anti-emetics, metoclopramide, and feeding a low-fat intestinal diet. A short course of prednisolone (½ mg/kg sid for 3-4 days) has been shown to aid recovery in acute pancreatitis; however, this needs to be weighed-up (risk vs benefits) as the patient is diabetic.

IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

Oviedo Veterinary Care and
Emergency

REFERRING VET

Dr Rivera

INVOICE

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DATE

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PATIENT **IMAGES**
 Oreo Saicuzza **Pancreas**

SPECIES

Canine

BREED

Shih Tzu

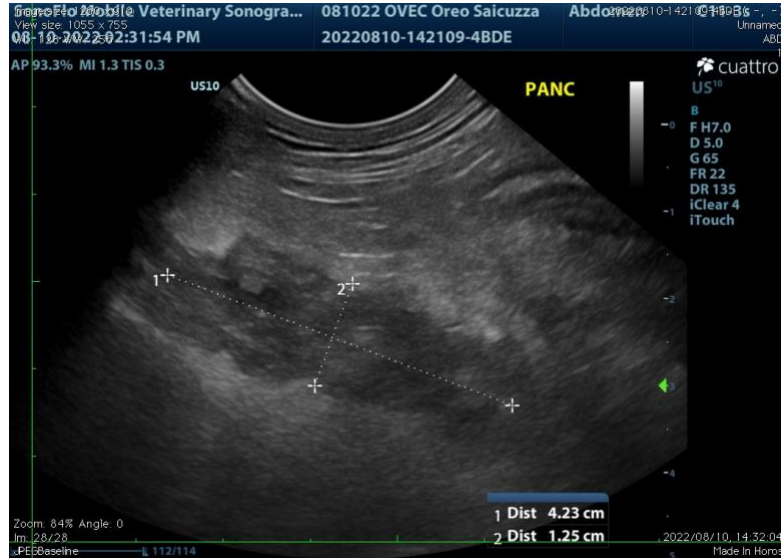
SEX

FS

Age

8 years

WEIGHT



Left kidney

INTERPRETED BY

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

IMAGING PERFORMED BY

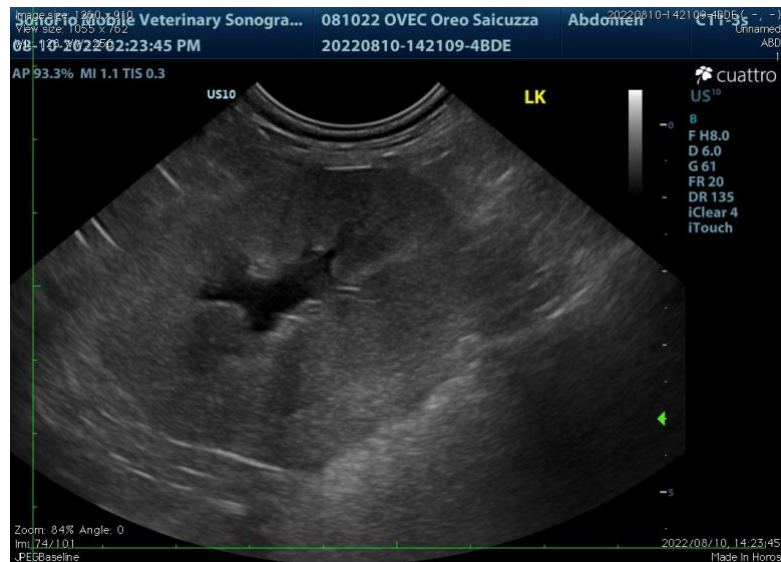
Sonya Myers, DVM

HOSPITAL NAME

Oviedo Veterinary Care and
 Emergency

REFERRING VET

Dr Rivera

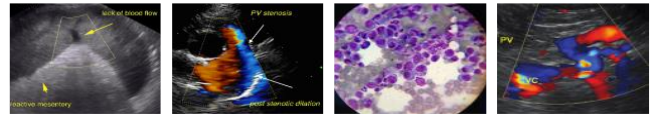


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PATIENT Liver

Oreo Saicuzza

SPECIES

Canine

BREED

Shih Tzu

SEX

FS

Age

8 years

WEIGHT

Right adrenal



INTERPRETED BY

Remo Lobetti, BVSc,
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ECVIM

IMAGING PERFORMED BY

Sonya Myers, DVM

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REFERRING VET

Dr Rivera

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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