

PATIENT

Zoe Isakowitz

SPECIES

Canine

BREED

Bichon Frise

SEX

FS

AGE

19 years

WEIGHT

18.5 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne Animal
Hospital

REFERRING VET

Dr Boazman

INVOICE

303199

DATE

8/13/22

PRESENTING CLINICAL SIGNS

History: 3-day duration of vomiting episodes, anorexia, and lethargy.

Physical Examination: N/A.

Urinalysis: Isosthenuria, culture pending.

CBC: N/A.

Serum Biochemistry: Elevated liver enzyme activity, bilirubin, and cholesterol. Abnormal cPL, Spec cPL pending.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and echogenic appearance of the wall. Normal anechoic urine with no sediment evident. Focal urolith (1.2 cm).

Normal trigone area, proximal urethra (0.3 cm), and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 4.4 cm, right 5.1 cm) with increased, echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule. Bilateral pinpoint mineralization.

Reproductive System

N/A.

Adrenal Glands

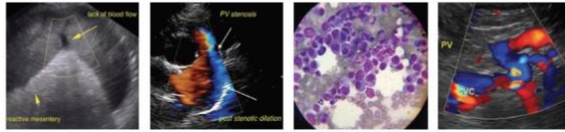
Normal shape, echogenic appearance, position, and size. Left 0.45 cm, right 0.47 cm.

Spleen

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

Liver

Enlarged with rounded edges, coarse echogenic appearance, normal portal markings, and regular curvilinear capsule. No nodules or masses evident. Distended gall bladder containing large amount of adherent and non-adherent hyperechogenic sediment. Normal thickness and appearance of the gall bladder wall. Dilated biliary tree (1.5 cm) up to a point with focal echogenic sediment with localized hyperechogenic appearance of the surrounding mesentery. Normal bile duct (0.3cm) and duodenal papilla.



PATIENT

Zoe Isakowitz

SPECIES

Canine

BREED

Bichon Frise

SEX

FS

AGE

19 years

WEIGHT

18.5 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne Animal
Hospital

REFERRING VET

Dr Boazman

INVOICE

303199

DATE

8/13/22

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.34 cm, jejunum 0.38 cm) and peristaltic activity, and no distension of the lumen.

Pancreas

Normal size (1.3 cm) and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

No mesenteric lymphadenomegaly.
No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Bile duct obstruction.
- Emerging mucocele.
- Hepatopathy.

Secondary findings:

- Age-related renal changes.
- Urolith.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the hepatopathy would be reactive secondary to the gall bladder/bile duct pathology, vacuolar, metabolic, early nodular regeneration, early cirrhosis, and chronic hepatitis.

Further assessment/therapy would be laparotomy for cholecystectomy, which would allow for removal of the urolith and obtaining a liver biopsy.



PATIENT

Zoe Isakowitz

SPECIES

Canine

BREED

Bichon Frise

SEX

FS

AGE

19 years

WEIGHT

18.5 #

IMAGES

Liver



Gall bladder



INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne Animal
 Hospital

REFERRING VET

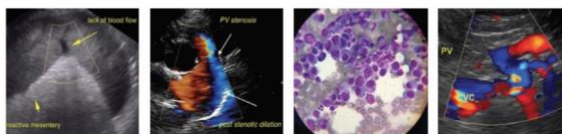
Dr Boazman

INVOICE

303199

DATE

8/13/22



PATIENT **Bile duct**

Zoe Isakowitz

SPECIES

Canine

BREED

Bichon Frise

SEX

FS

AGE

19 years

WEIGHT

18.5 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Wiseman, DVM

HOSPITAL NAME

Boca Midtowne Animal
 Hospital

REFERRING VET

Dr Boazman

INVOICE

303199

DATE

8/13/22



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