



PATIENT

Jackson Jansen

SPECIES

Canine

BREED

Australian Cattle Dog
Mix

SEX

Neutered male

AGE

14 years

WEIGHT

54 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Wallisch

HOSPITAL NAME

AH

REFERRING VET

Dr.

INVOICE

69902

DATE

1/12/26

PRESENTING CLINICAL SIGNS

History: P is being worked up for intermittent GI signs (vomiting and diarrhea). P is currently on HP diet. Current meds: Apoquel, B12 injections, glucosamine supplements. Noted elevated liver enzymes BW. Abd ultrasound to evaluate.

ALT 396, ALP 275 CBC wnl GI panel WNL with low normal B12 levels HWT neg PE: various lumps and bumps throughout trunk of body. One mass is pending cytology. periodontal disease. Laryngeal paralysis sound to breathing.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 6.0 cm, right measured 5.8 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is noted in both kidneys.

The prostate is small and hypoechogenic.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.55 cm in width. The right adrenal gland measured 0.53 cm in width.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 2.4 cm in width.

Liver

Normal size with diffuse increased, echogenic and coarse appearance, prominent portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.



PATIENT

Jackson Jansen

SPECIES

Canine

BREED

Australian Cattle Dog
Mix

SEX

Neutered male

AGE

14 years

WEIGHT

54 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Wallisch

HOSPITAL NAME

AH

REFERRING VET

Dr.

INVOICE

69902

DATE

1/12/26

Gallbladder

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. A moderate amount of ingesta is present in the stomach compatible with a recent meal.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas. The left pancreas measured 0.6 cm in width.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the hepatopathy would be age related reactive hyperplasia, early nodular hyperplasia, vacuolar and metabolic with chronic hepatitis with infiltrative neoplasia a highly unlikely differential diagnosis.

Although the GI tract appears ultrasonographically normal, with the presenting clinical signs and the low cobalamin, an underlying enteropathy such as parasitic enteritis, dietary hypersensitivity, and inflammatory bowel disease should still be considered.

Further assessment would be fecal analysis, endoscopy of the upper GI tract with biopsies. FNA cytology of the liver could also be considered; however, a tru cut or wedge biopsy may be required for a final etiological diagnosis.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management that can be considered for the enteropathy would be to continue feeding hypoallergenic diet, course of Fenbendazole, cobalamin supplementation and if there is still not a satisfactory improvement, then a course of Prednisolone would then be indicated.



PATIENT

Jackson Jansen

SPECIES

Canine

BREED

Australian Cattle Dog
Mix

SEX

Neutered male

AGE

14 years

WEIGHT

54 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Wallisch

HOSPITAL NAME

AH

REFERRING VET

Dr.

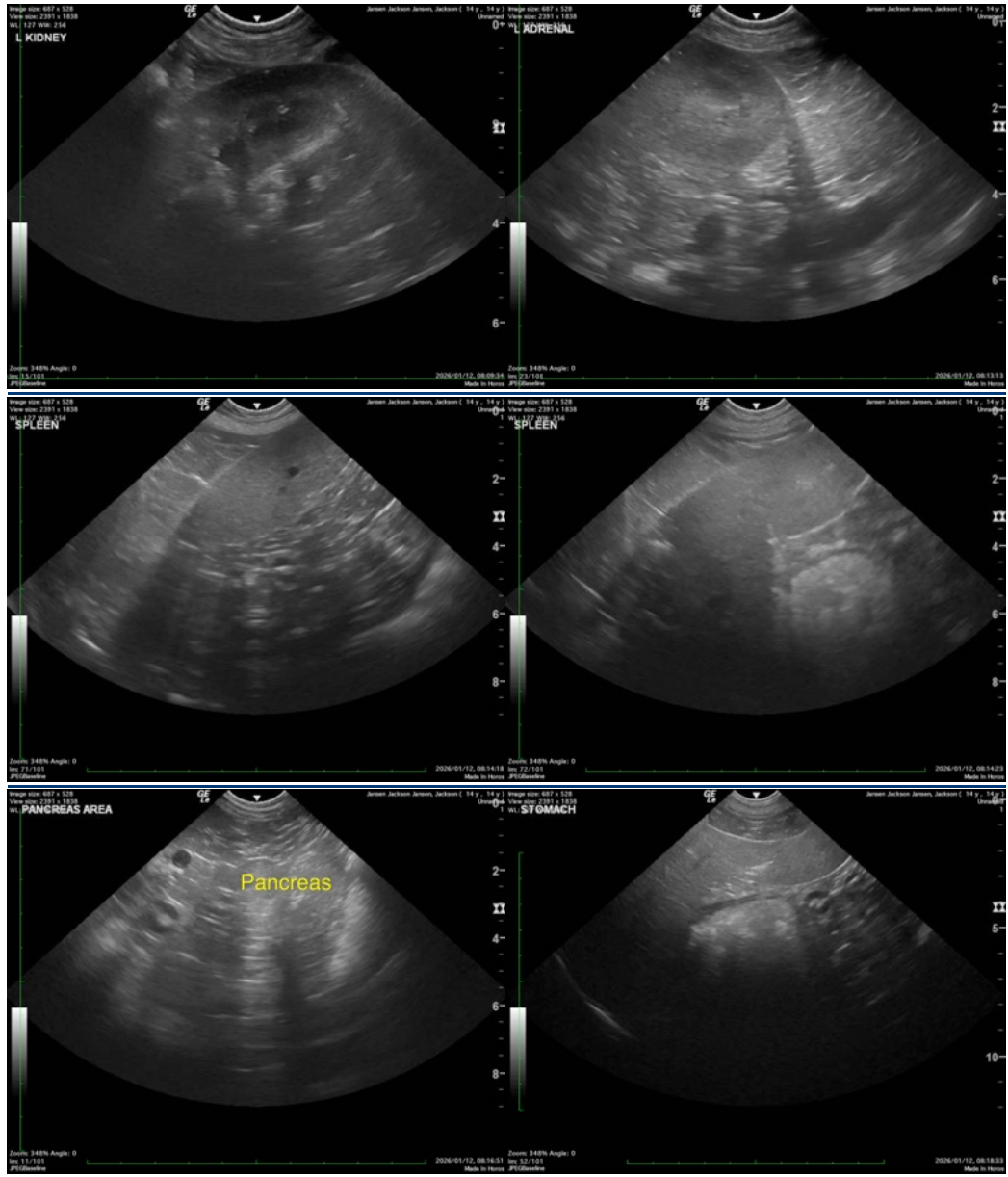
INVOICE

69902

DATE

1/12/26

Symptomatic management of the hepatopathy would be the use of Ursodiol with regular monitoring of liver enzyme activity.





PATIENT

Jackson Jansen

SPECIES

Canine

BREED

Australian Cattle Dog
Mix

SEX

Neutered male

AGE

14 years

WEIGHT

54 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Wallisch

HOSPITAL NAME

AH

REFERRING VET

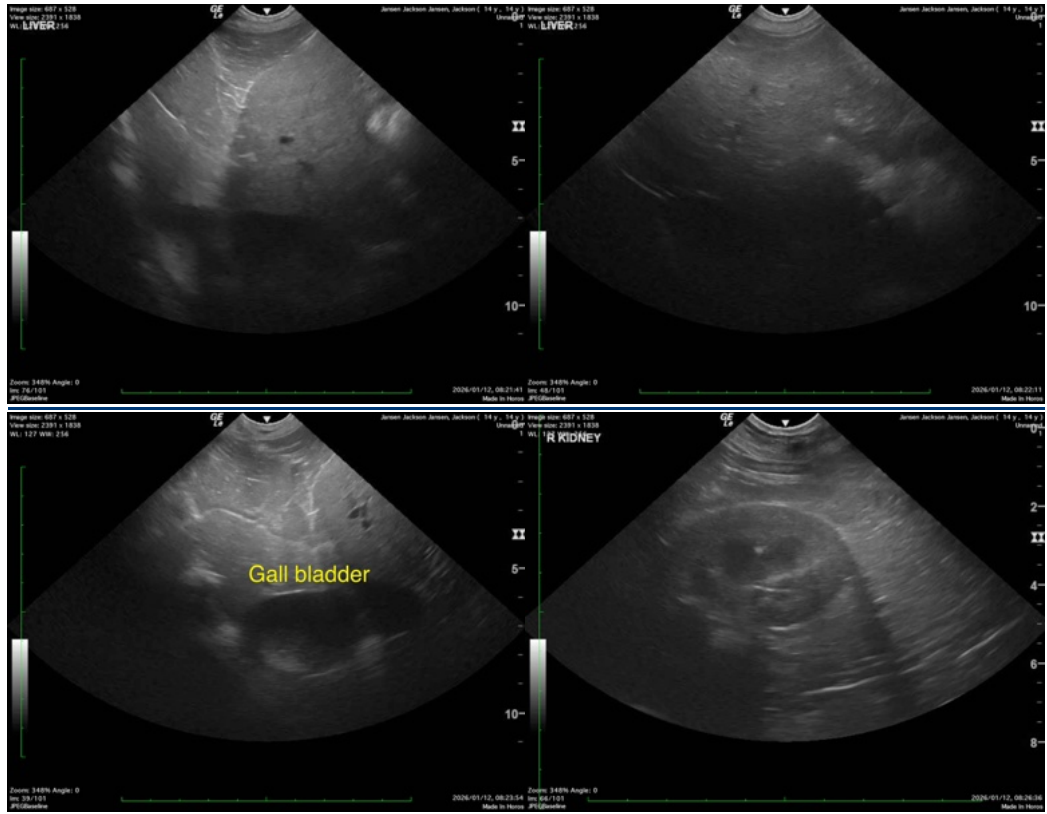
Dr.

INVOICE

69902

DATE

1/12/26





PATIENT

Jackson Jansen

SPECIES

Canine

BREED

Australian Cattle Dog
Mix

SEX

Neutered male

AGE

14 years

WEIGHT

54 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Wallisch

HOSPITAL NAME

AH

REFERRING VET

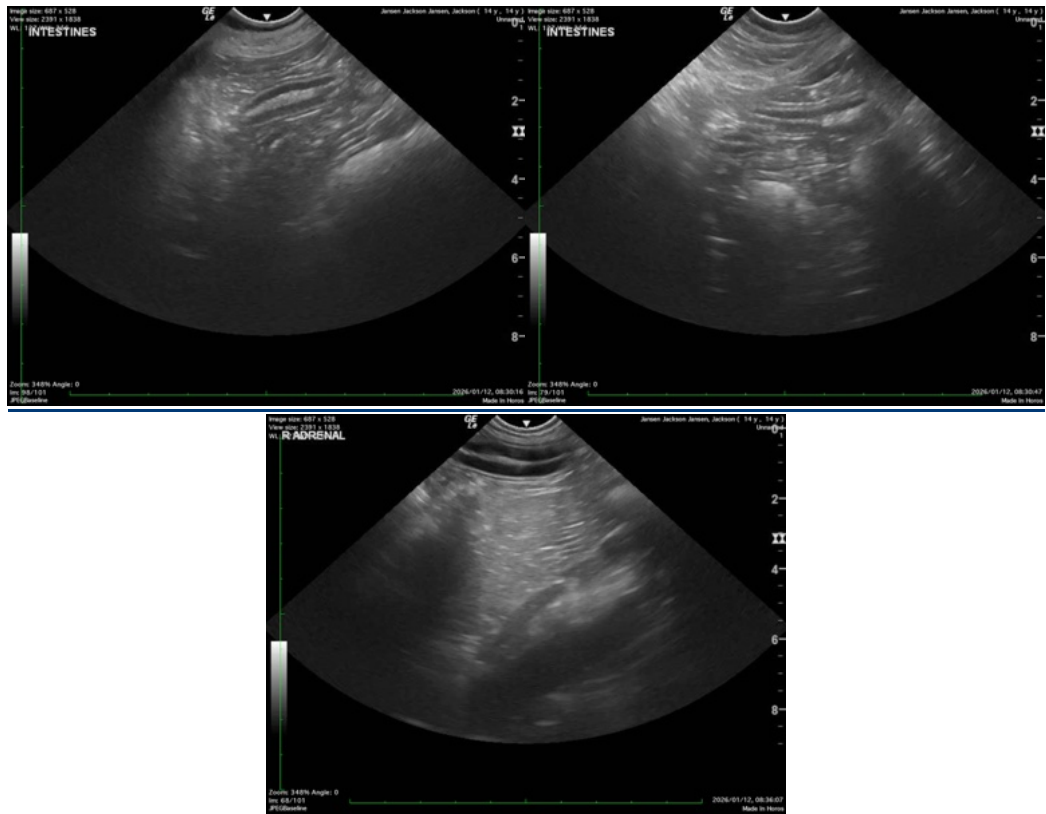
Dr.

INVOICE

69902

DATE

1/12/26



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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)

info@sonopath.com