



## PATIENT

Sprocket Orosz

## SPECIES

Canine

## BREED

Labrador

## SEX

Neutered male

## AGE

11 years

## WEIGHT

32 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Jill Rankin

## HOSPITAL NAME

Properties Animal  
Clinic

## REFERRING VET

Dr. Kangai

## INVOICE

72326

## DATE

3/6/26

## PRESENTING CLINICAL SIGNS

- Sprocket, a patient with a history of medically managed hypothyroidism, presented for lethargy and loss of appetite, with diagnostic findings indicating mild anemia and liver enzyme elevations.
- The primary clinical signs reported are lethargy and a significant loss of appetite, to the point where the patient is only consuming chicken and refusing treats. Bloodwork revealed a mild anemia, characterized by a hematocrit of 0.40 and decreased reticulocytes. Concurrently, there were notable elevations in liver enzymes, including an ALT of 206, an AST of 83, and an ALP of 211. A Spec cPL test was normal, and Cystatin B was elevated at 177.
- Sprocket has a known history of hypothyroidism and is typically managed with thyrotabs, with a previous T4 level recorded at 37.6. However, due to the inappetence, he did not receive his thyroid medication on the day of the blood draw or the preceding morning. A free-catch urinalysis was also performed, showing a urine specific gravity of 1.024, with 2-5 white blood cells and 2-5 red blood cells per high power field.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder is full 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 6.3 cm, right measured 6.2 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.

The prostate is small and hypoechogenic measuring 1.0 cm in width.

### Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.36 cm and 0.88 cm in width. The right adrenal gland measured 0.4 cm and 0.44 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 2.6 cm in width.



## PATIENT

Sprocket Orosz

## SPECIES

Canine

## BREED

Labrador

## SEX

Neutered male

## AGE

11 years

## WEIGHT

32 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Jill Rankin

## HOSPITAL NAME

Properties Animal  
Clinic

## REFERRING VET

Dr. Kangai

## INVOICE

72326

## DATE

3/6/26

## Liver

Normal size with a diffuse increased echogenic and coarse appearance, portal markings, and regular curvilinear capsule. An irregular, mottled echogenic parenchymal nodule was noted in the caudal lobe measuring 2.0 cm in size. No additional nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

## Gallbladder

The gallbladder is full almost distended containing a large amount of hyperechogenic and hypoechoic adhered and non-adhered sediment with the adhered sediment arranged in an early stellate pattern. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

## Gastrointestinal

Segmental thickening of the gastric wall with an irregular appearance measuring up to 0.9 cm in size with no loss of layering but with an increase in the muscularis to mucosa ratio. There was no distension of the lumen. 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. Fecal material was noted in the colon.

## Pancreas

The left lobe was enlarged and measured 2.4 cm in width with a mottled cystic and nodular appearance. Normal appearance of the right lobe. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

## Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

## ULTRASONOGRAPHIC FINDINGS

- Pancreatic pathology.
- Gastric thickening.
- Hepatopathy.
- Hepatic nodule.
- Emerging mucocele.



## PATIENT

Sprocket Orosz

## SPECIES

Canine

## BREED

Labrador

## SEX

Neutered male

## AGE

11 years

## WEIGHT

32 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Jill Rankin

## HOSPITAL NAME

Properties Animal  
Clinic

## REFERRING VET

Dr. Kangai

## INVOICE

72326

## DATE

3/6/26

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the pancreatic pathology would be previous pancreatitis, granulomatous disease and possibly emerging neoplasia.

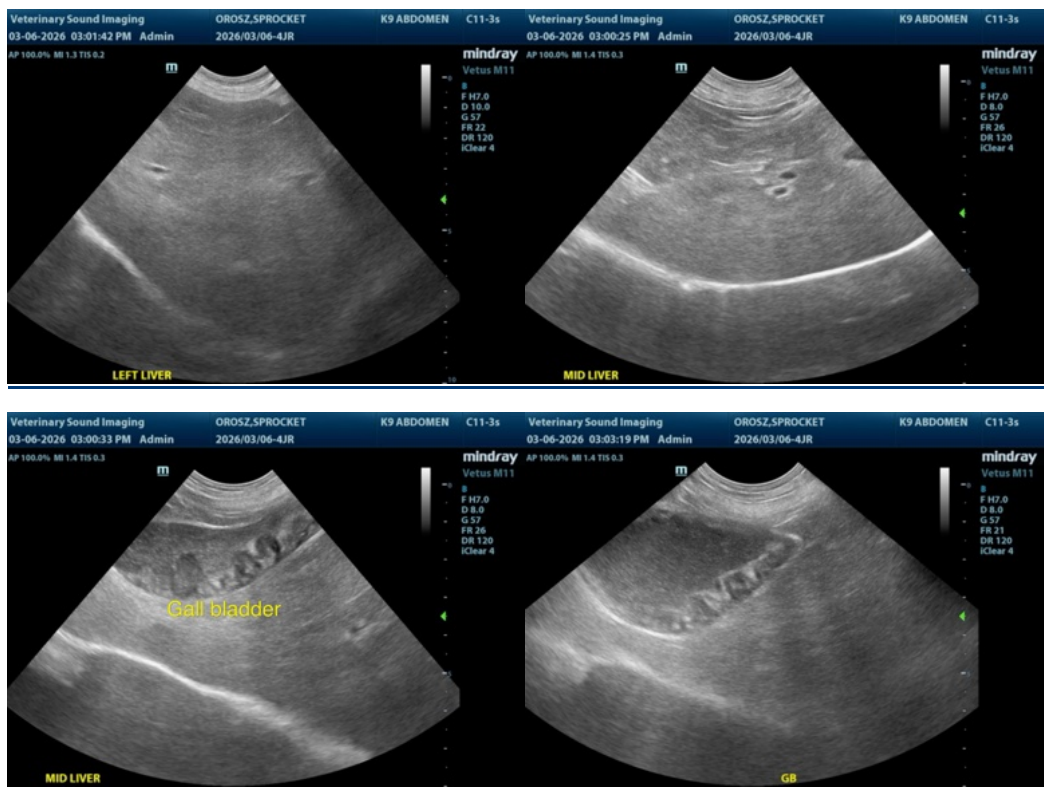
Etiologies for the gastric thickening would be chronic gastritis, Helicobacter gastritis, ulcerative disease, inflammatory bowel disease and possibly emerging neoplasia.

Etiologies for the hepatopathy would be reactive hyperplasia, early nodular hyperplasia, vacuolar and metabolic with hepatitis and infiltrative neoplasia an unlikely differential diagnosis.

The most likely etiology for the hepatic nodule would be incidental nodular hyperplasia.

Further assessment would be FAN cytology of the liver, hepatic nodule, pancreas and gastric wall and possibly gastroscopy with biopsies.

Specific therapy would be dependent on an etiological diagnosis.





## PATIENT

Sprocket Orosz

## SPECIES

Canine

## BREED

Labrador

## SEX

Neutered male

## AGE

11 years

## WEIGHT

32 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Jill Rankin

## HOSPITAL NAME

Properties Animal  
Clinic

## REFERRING VET

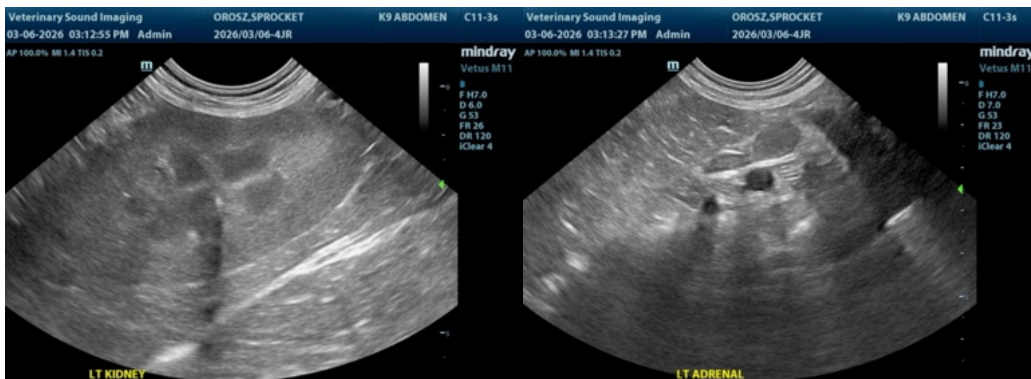
Dr. Kangai

## INVOICE

72326

## DATE

3/6/26





## PATIENT

Sprocket Orosz

## SPECIES

Canine

## BREED

Labrador

## SEX

Neutered male

## AGE

11 years

## WEIGHT

32 kg



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](mailto:info@sonopath.com)

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Jill Rankin

## HOSPITAL NAME

Properties Animal  
Clinic

## REFERRING VET

Dr. Kangai

## INVOICE

72326

## DATE

3/6/26