



**PATIENT PRESENTING CLINICAL SIGNS**

Kirby Cosco History of Heart Disease. Degenerative valve disease. New onset of acute fluid regurgitation (still able to keep food down). Medications used: Vetmedin, Cerenia, Metoclopramide, Famotidine, Sucralfate

**SPECIES RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN**

Canine The body condition score is 6/9 with a semicircular, fatty prominence in the umbilical region.  
Only 6 lumbar vertebrae are present.

**BREED Thorax**

Shih Tzu The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery. Aspiration pneumonia is not evident.

**SEX**

The cranial mediastinum is of physiological size and opacity. The trachea dips at the carina.

Neutered Male

The cardiac silhouette occupies 85% of the chest height and 3 intercostal spaces. The main stem bronchi on the rotated VD's appear slightly laterally displaced.

**AGE Abdomen**

14 Years

The abdominal detail is good; diaphragm and abdominal wall are intact.  
The liver is located within the costal arch and the caudo-ventral lobe is pointed.

**INTERPRETED BY**

The head of the spleen appears physiological.

Heike Rudolf, DVM,  
Dr. med. Vet.,  
DipECVDI DVR

The stomach contains a moderate amount of air; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of formed fecal matter.

**HOSPITAL NAME**

Stuga North VC

Liquid barium study: a small amount of liquid Barium outlines the caudal oropharynx and is present in the stomach (12:10). Additional Barium was introduced at 12:17 and a small pool of liquid is present just caudal to the upper esophageal sphincter, the rest outlines the mucosal folds of the esophagus as well as oropharynx and pylorus. At 12:31 no Barium is evident in the esophagus. Most of the Barium at 12:50 is located in pylorus and proximal small intestine and continues along the jejunum. No barium has reached the colon at termination of the study (13:26).

**REFERRING VET**

Dr. Pesola

Both renal shadows are not clearly visible. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

The prostate does not appear enlarged.

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The sublumbar region appears physiological.

**RADIOGRAPHIC DIAGNOSIS**

**DATE**

2/17/23

- Delayed gastric emptying, mild
- Possible enlargement left atrium



**PATIENT** Incidental finding

Kirby Cosco • Small umbilical hernia

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SPECIES** The small pool of Barium caudal to the cricopharyngeal sphincter could indicate an esophageal motility disorder. Gastric emptying as well as intestinal transit time depend on the amount of Barium administered (in small breeds at least 7ml/kg); too little will fail to initiate normal gastric emptying and intestinal contractions are less numerous. Similarly, the esophagus requires a certain amount of Barium before a primary contracting wave is initiated. Thus, fluoroscopy is the method of choice for the investigation of esophageal motility disorders. Regurgitation of fluid can be due to laryngeal and tonsillar abnormalities, in larger breeds laryngeal paralysis is often the cause, uncoordinated swallowing actions, gastro-esophageal reflux and sliding hiatal hernia. Endoscopic examination of esophagus and gastro-esophageal sphincter is recommended to rule out the latter two.

Canine

**BREED** Shih Tzu

**TECHNICAL COMMENTS**

**SEX** Neutered Male

Non-DICOM images were submitted. The transformation from DICOM to other formats reduces the image quality and only allows limited manipulation of the image. More subtle lesions can thus easily be missed. For the best possible imaging reports, I suggest submitting DICOM images in the future.

**AGE** 14 Years



**INTERPRETED BY**

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Dr. med. Vet.,  
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**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.**

**REFERRING VET**

Dr. Pesola 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.

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**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
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**DATE**

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**PATIENT**

Kirby Cosco

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

Neutered Male

**AGE**

14 Years

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Dr. Pesola

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