



**PATIENT PRESENTING CLINICAL SIGNS**

**Houston Fahey** History: 3-week hx of diarrhea. O originally thought that I/d was causing diarrhea because diet switch to EN resolved diarrhea and switch back to I/d prompted return. However, switch back to EN + propectalin is not resolving diarrhea now, energy is low. No vomiting, p is still eating full meals.

**SPECIES** Fecal screen neg for parasites 3/3, CBC/chem/cortisol screen 2/22 WNL. P was on I/d for presumptive hepatic microvascular dysplasia (AUS, liver bx, and protein C levels consistent with diagnosis 2020

**Canine** Abnormal PE/Chem/CBC/UA Results: fecal 3/3/23: no ova/parasites/antigen in-house CBC/chem17/lytes 2/22/23- all WNL: in-house cortisol 2/22/23- WNL (2.3) protein C 8/4/20- WNL (91) liver bx 07/25/2020- histologically compatible with hepatic vascular anomaly

**BREED RADIOGRAPHIC STUDY OF THE ABDOMEN**

**Mix** The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity.

**SEX** The bony structures appear physiological.

**Neutered Male** The abdominal detail is good; diaphragm and abdominal wall are intact.

The liver is located well within the costal arch and the caudo-ventral lobe is pointed.

**AGE** The spleen is located within the costal arch.

**6** The stomach contains a moderate amount of air and has an upright axis with a cranially rotated pylorus; distribution and size of the small intestinal loops appear physiological. Caecum and the proximal colon contain gas, followed by some unformed feces. Terminal colon and rectum contain a soft tissue/fluid opacity and their height is slightly increased.

**INTERPRETED BY**

**Heike Rudorf, DVM, Dr. med. Vet., DipECVDI DVR** Both renal shadows appear to have a physiological size. The bladder is located in the abdominal cavity and contains a small amount of homogeneous fluid opacity.

Signs of prostatic enlargement are not evident.

**HOSPITAL NAME**

**Northshore VH** The sublumbar region appears physiological.

**RADIOGRAPHIC DIAGNOSIS**

- Fluid filled colon
- Microhepatica

**REFERRING VET**

**Dr. Brita Kiffney**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I can see no signs of obstruction; a localized alteration of intestinal wall layering and -thickens was probably ruled out during the ultrasound examination. Fluid in the colon is suggestive of colitis. In case lactulose or antibiotics were part of the PSS-treatment, these may have caused the diarrhea. However, an allergic reaction to the source of the protein or to added ingredients, such as coconut oil, can also result in diarrhea; insect or vegetable based (e.g., peas) protein may improve the signs. A trial period of systemic glucocorticoids may reduce the inflammation; rectal administration of cortisone can also be beneficial.

**INVOICE**

21581

**DATE**

3/10/23



**PATIENT**

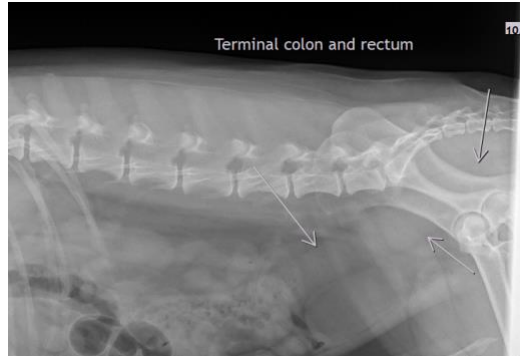
Houston Fahey

**SPECIES**

Canine

**BREED**

Mix



**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.**

**SEX**

Neutered Male

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.

**AGE**

6

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
dr.h.rudorf@gmail.com

**INTERPRETED BY**

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

**HOSPITAL NAME**

Northshore VH

**REFERRING VET**

Dr. Brita Kiffney

**INVOICE**

21581

**DATE**

3/10/23