



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Clover Hoffman **PRESENTING CLINICAL SIGNS** History: Acute onset, 24 hour lethargy, inappetence, and anorexia. RF limb amputation secondary to trauma in Early February. No vomiting or diarrhea. **SQ FLUIDS WERE GIVEN PRIOR TO RADIOGRAPHS**

SPECIES Canine **Abnormal PE/Chem/CBC/UA Results:** PE: 5% dehydration, mild hunched stance, uncomfortable but not isolatable pain, lower canine teeth erupting on schedule. Rectal exam: normal and stool is soft. CBC: WBC 23.86 K/uL, Neut 19.98 K/uL, Eos 0.04 K/uL Blood Smear matches, no abnormal cells

RADIOGRAPHIC STUDY OF THORAX, ABDOMEN AND SHOULDERS

BREED Jack Russell Mix **BREED** A soft tissue swelling with s.c. emphysema is located dorsal to the cranial thoracic spinous processes. The region of the ventral neck also shows a striated appearance of the soft tissues cranial and to the left of the thoracic inlet. Only the left foreleg is present. A metal staple is present in the region of the right scapula on the VD and overlying sternebra 2 on the lateral. The BCS is 5/9.

SEX Female **Thorax** The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are visible but the outline of the tertiary vascular branches is blurred, especially on the right, and bronchi are highlighted. The diameter of the vessels for cranial and caudal lung lobe is reduced.

AGE 5 Months **AGE** The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and dips at the carina. A small amount of air is present in the cranial thoracic esophagus.

INTERPRETED BY Heike Rudorf, DVM, Dr. med. Vet., DipECVDI DVR **INTERPRETED BY** The cardiac silhouette occupies 80% of the chest height and 3 intercostal spaces (VHS 9.5). The caudal heart border appears straight, and a small bulge appears to be present at 2 o'clock.

Abdomen The abdominal detail is in line with age and BCS; diaphragm and abdominal wall are intact.

HOSPITAL NAME Elizabeth AH **HOSPITAL NAME** The liver is located within the costal arch and the caudo-ventral lobe is pointed. The head of the spleen appears physiological.

REFERRING VET Leon Anderson, DVM **REFERRING VET** The stomach is empty. One curved, gas filled intestinal loop with the appearance of a string of pearls is located in the mid-ventral abdomen, level with L4/5. Its orientation changes in the three abdominal views but remains otherwise similar. A tubular, soft tissue structure with straight walls is superimposed onto the cranial bladder and is, in right lateral recumbency, located just caudal to the gas filled intestinal loop. Colon and rectum contain a large number of fecal boluses.

INVOICE 21894 **INVOICE** Both renal shadows appear to have a physiological size and opacity. The bladder is located in the abdominal cavity and is distended by a moderate amount of homogeneous fluid opacity.

DATE 3/31/23 **DATE** The sublumbar region appears physiological.



PATIENT **RADIOGRAPHIC DIAGNOSIS**

Clover Hoffman

- Localized ileus mid abdomen
- Obstipation
- Tubular structure over bladder shadow
- Hypovolemia
- Possible enlargement of pulmonary artery segment
- S.c. emphysema and soft tissue swelling dorsum

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Jack Russell Mix

The localized change of the jejunum could be the result of the obstipation due to intestinal inflammation or could represent stasis due to a mechanical obstruction. In puppies viral infections and foreign body have to be considered. The tubular structure overlying the bladder could represent a slightly distended small intestinal loop or an enlarged uterus; the latter would be unusual in such a young animal. Nevertheless, I recommend abdominal ultrasound to assess the contents of the intestine and to rule out uterine enlargement. Should the dog be unable to defecate, the described fecal matter should be removed manually.

SEX

Female

The s.c. changes are likely the result of fluid administration. In case of hypovolemia the physiological cardia shape can change. Should a murmur be present after replenishment of fluid, echocardiography will be able to establish if a degree of pulmonic stenosis is present.

AGE

5 Months

TECHNICAL COMMENTS

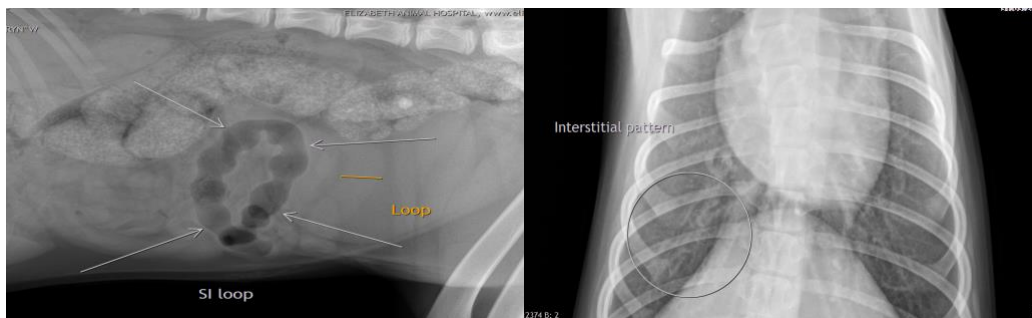
A human P3 is present in the primary beam on the VD thorax.

INTERPRETED BY

Heike Rudorf, DVM,
Dr. med. Vet.,
DipECVDDI DVR

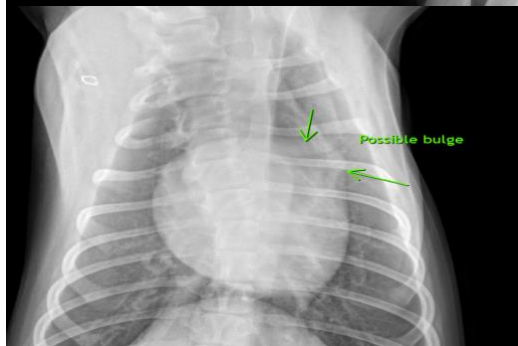
HOSPITAL NAME

Elizabeth AH



REFERRING VET

Leon Anderson, DVM



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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.

SPECIES

Canine

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.

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

BREED

Jack Russell Mix

SEX

Female

AGE

5 Months

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