



PATIENT PRESENTING CLINICAL SIGNS

Coal Evans History: Anorexia, abdominal pain, diarrhea, worsening over the last 2 weeks
 Abnormal PE/Chem/CBC/UA Results: Painful abdomen. Anemia - was normal April 4th when started clinical signs, now 23% Neutrophilia with left shift - was normal April 4th, recheck 2 days ago WBC count is over 40,000 Chemistry - consistent mild elevation in globulin and ALKP, otherwise unremarkable including electrolytes UA, mild hematuria and pyuria, usg 1.038, urine culture negative Dog did have thyroid carcinoma removed in 2022

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

BREED

The body condition score is 5/9 with a slightly distended appearance of the abdomen.

Min Schnauzer X
 Scottie

The bony structures are within normal limits.

Abdominal and retroperitoneal detail is reduced though the general organ outline is still detectable.

SEX

The region of the pancreas is of relatively homogeneous soft tissue opacity.

Neutered Male

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

AGE

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Body and tail of the spleen are prominent in both lateral recumbencies; so is the head on the VD.

The stomach contains a small amount of air. The small intestinal loops appear to be caudo-ventrally displaced by the kidneys and have a physiological size. Colon and rectum contain a small quantity of formed fecal matter.

INTERPRETED BY

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

On the VD view the right renal shadow (RK) appears to be enlarged (4x the length of L2) whereas the left renal size appears physiological (3x the length of L2), though both renal outlines are partially obscured by intestinal loops. On both lateral recumbent views the renal size appears physiological. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

HOSPITAL NAME

Lac Ste. Anne VS

A prostatic shadow is not outlined and the rectum has a physiological position.

The region of the sublumbar lymph nodes appears physiological.

REFERRING VET

Dr. Sarah Fryer

RADIOGRAPHIC DIAGNOSIS

- Possible reduction of abdominal detail
- Possible right renomegaly

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

22114

The radiographic results are equivocal but rupture of bladder or small intestine is unlikely. A reduction of the abdominal detail can be exposure related, due to a lack of fat or represent a disease such as mesenteric inflammation/edema or peritoneal fluid. Lymphadenitis also has to be considered. The localized increase in opacity in the region of the pancreas could represent pancreatitis; cPLI should be

DATE

4/21/23



PATIENT

Coal Evans

measured if it has not already been done. An enlargement of one kidney can represent an artefact due to superimpositioning, be congenital or the result of a disease such as hydronephrosis or lymphoma. Further imaging is necessary and ultrasound is recommended. This will allow identification of even small fluid pockets, identification of a hyperechoic mesentery and assessment of the parenchymal structure of all organs. Enlarged lymph nodes with an altered appearance will be easily detectable and samples should be obtained. Though the included part of the lungs appear physiological, pulmonary abscess, aspiration pneumonia and mediastinal abscess should be ruled out with thoracic radiographs.

SPECIES

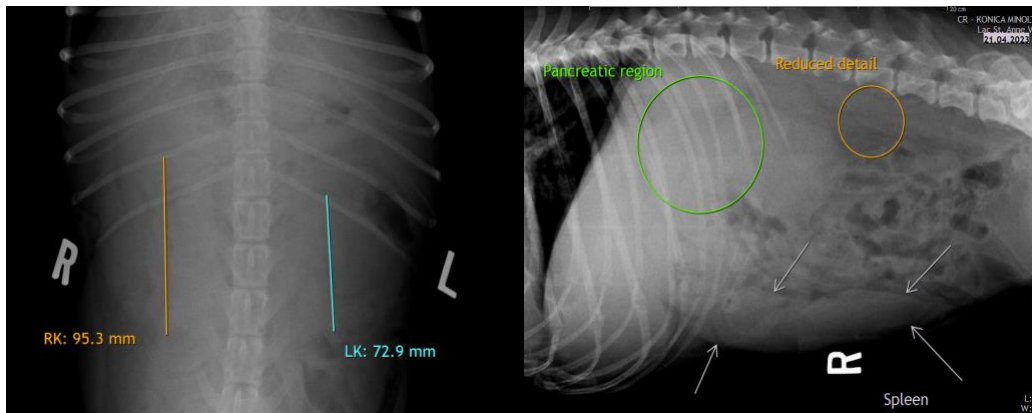
Canine

BREED

Min Schnauzer X
Scottie

SEX

Neutered Male



AGE

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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.

INTERPRETED BY

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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Dr. med. Vet.,
DipECVDI DVR

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