



PATIENT PRESENTING CLINICAL SIGNS

Josee Helton History: Dysuria. Hx uroliths.
Abnormal PE/Chem/CBC/UA Results: FB in stomach is incidental finding. Dog has no GI signs.

SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN

Canine The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity.

BREED A large amount of new bone surrounds both femoral necks and acetabula. The center of both femoral heads is located lateral to the dorsal acetabular edge.

Shih Tzu The abdominal detail is good; diaphragm and abdominal wall are intact.

SEX The liver is located within the costal arch, level with the floating ribs; the caudo-ventral lobe is rounded.

Spayed Female The spleen appears physiological.

AGE A short, tubular, mineral opaque structure is located in the stomach and moves according to the recumbency; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of fecal matter.

14 Years Both renal shadow pelvises contain a seagull shaped mineral opacity and further calcifications within the renal calyces. The bladder is located in the abdominal cavity and contains a small amount of fluid in which a round, mineral dense structure of approx. 0.8cm is located; the borders of which are slightly irregular.

INTERPRETED BY

Heike Rudolf, DVM, Dr. med. Vet., DipECVDI DVR The sublumbar region appears physiological.

RADIOGRAPHIC DIAGNOSIS

- HOSPITAL NAME**
- Bilateral staghorn calculus
 - Cystic calculus

Pinebrook AH Incidental findings

- REFERRING VET**
- Bilateral HD and OA, moderate
 - Gastric foreign body

Dr. Britt Dubil

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

16424 Staghorn calculi are composed of struvite (magnesium ammonium phosphate) and are usually seen in the setting of recurrent urinary tract infection with urease-producing bacteria (e.g. Proteus, Klebsiella, Pseudomonas and Enterobacter). Urease hydrolyzes urea to ammonium with an increase in the urinary pH. Infection-induced struvite nephroliths are amenable to medical dissolution with dietary therapy and concurrent antibiotic treatment for the entire dissolution period. Surgical removal

DATE

7/1/22



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of the bladder stone is an alternative. Nephroliths may obstruct the renal pelvis or ureter or lead to progressive CKD. If they are not causing complications, they do not require removal, but they should be monitored periodically by urinalysis, urine culture, radiography and ultrasonography. Indications for removal of nephroliths in dogs include obstruction, recurrent infection, progressive nephrolith enlargement, symptomatic nephroliths, and patients with nephroliths in a solitary functional kidney.

SPECIES

Canine

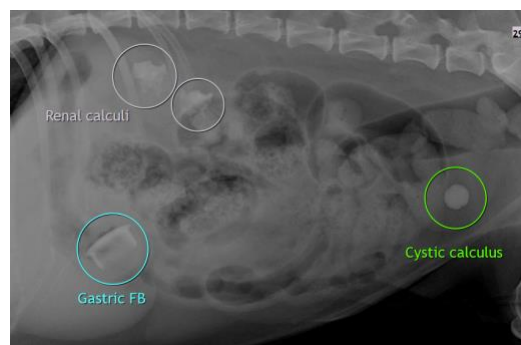
Removal of the gastric foreign body is removed as it may cause intestinal obstruction once it has passed into the duodenum.

BREED

Shih Tzu

SEX

Spayed Female



AGE

14 Years

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

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

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

HOSPITAL NAME

Pinebrook AH

REFERRING VET

Dr. Britt Dubil

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