



**PATIENT PRESENTING CLINICAL SIGNS**

Marty Vaessen History: Urinating in house, urinalysis showed that there wasn't an infection, however was 2+ Bilirubin in urine. Patient has anxiety, agitation, is unable to settle. Has vomited a few times. Stool on rectal was very watery and on cytology there was a high amount of epithelial cells. Bloodwork is pending.

**SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN**

Canine The body condition score is 4/9.

**BREED** The bony structures are within normal limits.

Great Dane The abdominal detail is poor but in line with the low BCS; diaphragm and abdominal wall are intact.

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

**SEX** The tail of the spleen is located level with L5/6 and extends further caudally.

Male The stomach contains a large amount of food; distribution and size of the small intestinal loops appear physiological. The colon contains a small amount of unformed fecal matter.

**AGE** The left renal shadow is of physiological size, shape and opacity; the right is superimposed by intestinal loops. Bladder and prostate are not included.

12 Months

The sublumbar region is not obviously enlarged.

**INTERPRETED BY RADIOGRAPHIC DIAGNOSIS**

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

- Bladder shadow not visible
- Splenic tail located caudally

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Sunridge VC

I can see no cause for the vomiting. The absence of the bladder shadow may be due to the centering, an empty bladder or an intrapelvic bladder position. Should signs of incontinence be present, ultrasound and IVU can help identify ectopic ureters. A retrograde urethra-cystogram can identify urethral inflammation and retrograde filling of an ectopic ureter.

**REFERRING VET**

Dr. Barry Magill

**INVOICE**

16585

**DATE**

7/29/22



**PATIENT**

Marty Vaessen

**SPECIES**

Canine

**BREED**

Great Dane

**SEX**

Male

**AGE**

12 Months



**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.**

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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**INTERPRETED BY**

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