



PATIENT

Willow Huynh

PRESENTING CLINICAL SIGNS

Willow came 10 days ago for lethargy, diarrhea with some mucous and anorexia . Chem / CBC / cPL snap test was normal . sent home with Metronidazole tablets BID / Tylosin 200 mg SID / Sulcrate TID . Willow came again today with no improvement in term of diarrhea and eats only when the owner forced her to do.

SPECIES

Canine

RADIOGRAPH OF THORAX AND ABDOMEN

Both lateral recumbencies of thorax and abdomen (T2-tail)

BREED

French Bulldog

RADIOGRAPHIC FINDINGS

The body condition score is 6/9 with a moderate amount of subcutaneous fat.

The tail shows congenital malformations.

SEX

FS

Thorax

The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery.

AGE

5 Years

The cranial mediastinum is of physiological size and opacity. The trachea dips at the carina.

The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces. No chamber or outflow tract enlargement is evident.

INTERPRETED BY

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

Abdomen

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

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

HOSPITAL NAME

Brittany Glen Animal
Hospital

The spleen appears physiological.

The GIT is void of solid material. The gastric axis is rotated cranially with respect to the ribs. The tail of the spleen is located within the rib cage. Distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of gas on one view.

REFERRING VET

Dr. Boktor

One renal shadow is clearly visible and has a physiological size, shape and opacity. The bladder is located in the abdominal cavity and contains a small amount of homogeneous fluid opacity.

The sublumbar region appears physiological.

RADIOGRAPHIC DIAGNOSIS

INVOICE

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- Smallish liver
- Screw tail (incidental finding)

DATE

7-8-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no signs of a radiopaque foreign body in the esophageal region or the stomach. Abdominal ultrasound is recommended to assess gastro-intestinal wall thickness and layering as inflammatory bowel disease is one differential diagnosis. Obtaining B12 and folate levels should be considered if they have not already been obtained. In thin, deep chested dogs the liver is



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physiologically located within the costal arch and the pylorus relatively far cranially located. This may be the case here as well. As a full biochemistry was obtained this should have ruled out a secondary PSS.

TECHNICAL COMMENTS

SPECIES

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Image labelled "data 3" does not open. Both views are rotated. Considering the position of caudal vena cava, stomach and the diaphragmatic crura, both images show an incorrect side marker.

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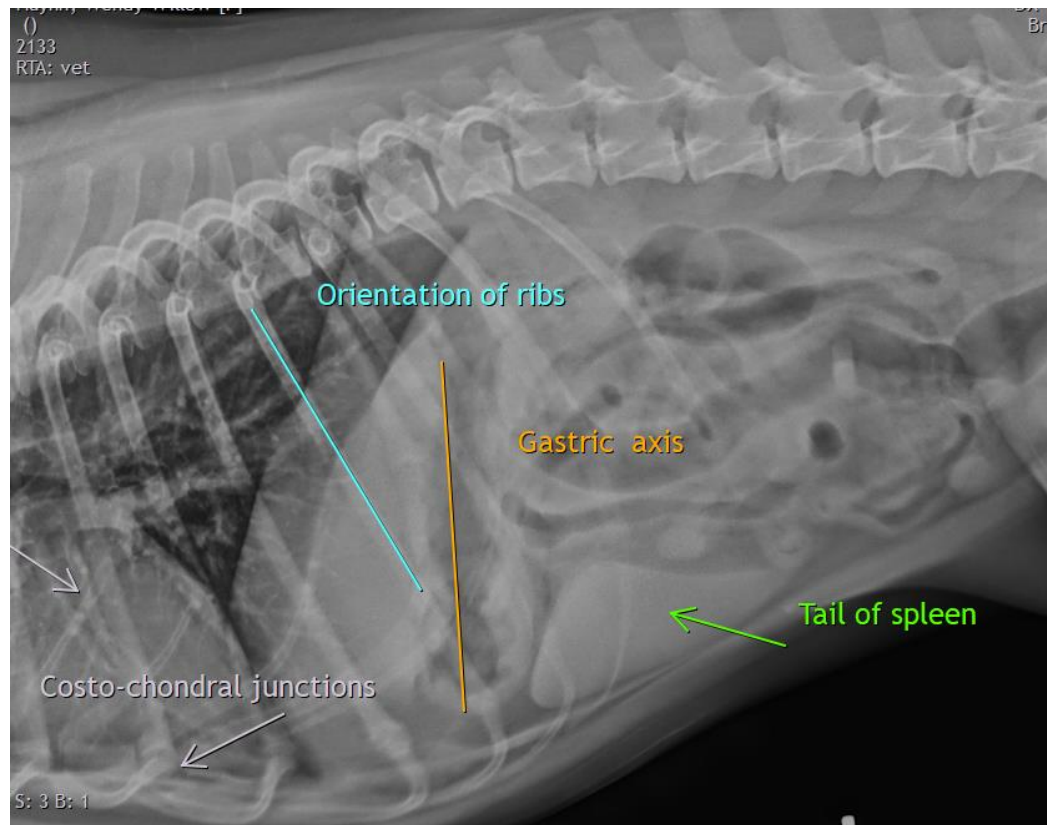
Heike Rudolf, DVM,
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REFERRING VET

Dr. Bektor



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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.

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.

DATE

7-8-22

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