



**PATIENT PRESENTING CLINICAL SIGNS**

Anya Campbell Pain with defecation, losing weight. Checking for explanation for pain in hind.

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

**SPECIES** The body condition score (BCS) is 5/9 with a tucked up ventral abdominal wall.

Canine The bony structures are within normal limits. The pelvis is rotated to the right and subluxation thus difficult to assess, but new bone is located at femoral head and neck. A fine, sclerotic line is also evident on the left femoral neck.

**BREED** The abdominal detail is in line with the low BCS; diaphragm and abdominal wall are intact.

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

The spleen is also located within the costal arch and appears of physiological size and opacity.

**SEX** The stomach contains a very small amount of air; distribution and size of the gas containing small intestine appear physiological. Colon and rectum contain a small amount of fecal matter and some gas.  
FS On the caudal VD view of the abdomen, the right rectal wall appears displaced towards the left and the amount of soft tissue opacity appears to be larger than on the left side.

**AGE** Both renal shadows are poorly outlined due to a lack of fat and their region is superimposed by intestinal loops. The bladder is located in the pelvic canal and contains a small amount of homogeneous fluid opacity.  
4 Years

**INTERPRETED BY** The sublumbar region appears physiological.

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

**RADIOGRAPHIC DIAGNOSES**

- Possible rectal impingement from the right
- Arthrosis hip joints, possible subluxation on right
- Gas in small intestine

**HOSPITAL NAME**

GROVE VETERINARY  
CLINIC

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET**

Dr. Lynne Luna

The changes described for the rectum could be due to the pelvic rotation to the right, allowing an asymmetrical visibility of the physiological soft tissue. However, should it be a true finding, it does not seem to be large enough to result in difficulty with defecation. Hip and spinal pain, however, can cause this clinical sign. A neurological examination of the lumbar and lumbar-sacral spine as well as the orthopedic examination of the hind limbs is recommended to rule out disc disease, CDRM, HD and cruciate ligament damage. For the investigation of a mass lesion in the pelvic canal, a Barium enema or pneumocolon is necessary. Digital palpation may also be helpful to identify a solid structure in the right pelvic canal. An i.v. contrast CT examination is, however, faster and less cumbersome. The spine can be assessed during the same study. Abdominal ultrasound is recommended to rule out a possible splenic hemangiosarcoma or intestinal wall disease such as IBD.

**INVOICE**

59783

**DATE**

8-17-23



**PATIENT**

Anya Campbell

**SPECIES**

Canine

**BREED**

German Shepherd

**SEX**

FS

**AGE**

4 Years

**INTERPRETED BY**

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**HOSPITAL NAME**

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**REFERRING VET**

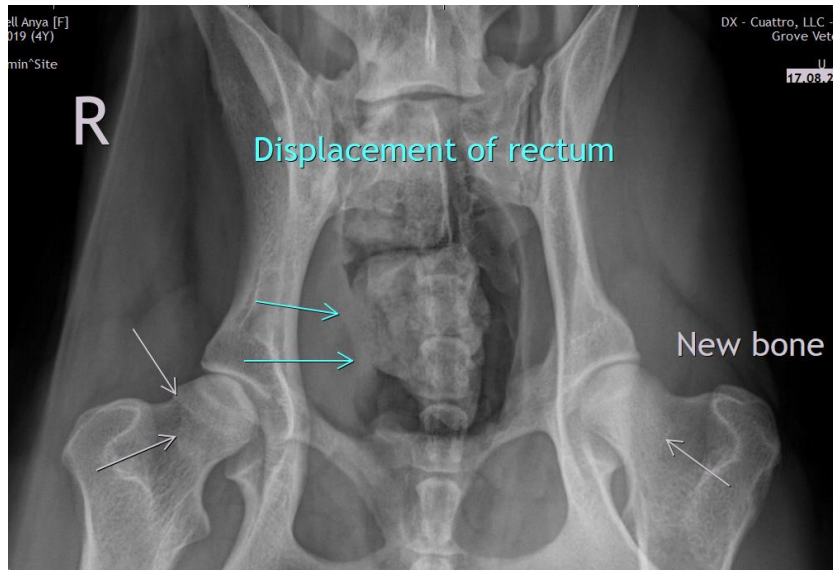
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**PATIENT**

Anya Campbell

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.

**BREED**

German Shepherd

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
Dr.H.Rudorf@gmail.com

**SEX**

FS

**AGE**

4 Years

**INTERPRETED BY**

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