



PATIENT PRESENTING CLINICAL SIGNS

J. D. Leech History: 4 episodes of seizures, vomiting in the morning for 4 days

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: CBC: Hemogram: elevated HGB r/o dehydration , Leukogram: WNL , Thrombogram:WNL Chemistries: Kidney: elevated BUN r/o dehydration vs CKF , Liver:elevated elevated GGT, T. Bil. r/o gallbladder disease vs liver disease , Protein : elevated T. Protein & albumen r/o dehydration Lytes:WNL

RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

BREED

Pug

The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity. The bony structures appear physiological.

SEX

Neutered Male

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.

AGE

21 Months

The caudal cervical trachea is reduced in height by a semicircular, dorsal soft tissue opacity.

The cardiac silhouette occupies 75% of the chest height and 3.5 intercostal spaces (VHS 11). No chamber or outflow tract enlargement is obvious.

INTERPRETED BY

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

Abdomen:

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

The liver is located well within the costal arch and the gastric axis is rotated cranially.

HOSPITAL NAME

St. Catharine's AH

The tail of the spleen is small.

The stomach contains food and the axis is rotated cranially on the right lateral recumbent view. The small intestine is evenly distributed throughout the abdominal cavity and contains varying amounts of gas. The diameter of two loops is slightly increased in left lateral recumbency.

REFERRING VET

Dr. Masoud

Both renal shadows are superimposed by intestinal loops. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

The sublumbar region contains a moderate amount of fat.

INVOICE

12634

RADIOGRAPHIC DIAGNOSIS

- Smallish liver
- Variable intestinal luminal width

DATE

8/20/21



PATIENT Incidental finding

- J. D. Leech
- Tracheal collapse
 - Obesity

SPECIES **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Canine
 Breed: Pug
 The small liver is highly suggestive of a PSS. The variable position of the intestinal gas in association with changing diameter is most likely due to a hypermotility associated enteritis. Abdominal ultrasound is recommended to identify shunting vessels, localize both kidneys and to assess intestinal wall layering and thickens. Once renal dysplasia has been ruled out and shunting vessel has not detected, a contrast CT examination may be useful to identify small shunting vessels or an increased resistance due to microvascular hepatic disease; a liver biopsy is necessary to diagnose the latter.

SEX
 Neutered Male
 Tracheal collapse can be due to a weakened dorsal tracheal ligament. It is usually caused by chondromalacia and is thus due to an altered cartilage development which may go unnoticed until physical circumstances or disease reduces the ease of airflow. Tracheoscopy is the method of choice for a definitive diagnosis.

TECHNICAL COMMENTS

AGE
 21 Months
 Wrong side marker on one view

INTERPRETED BY

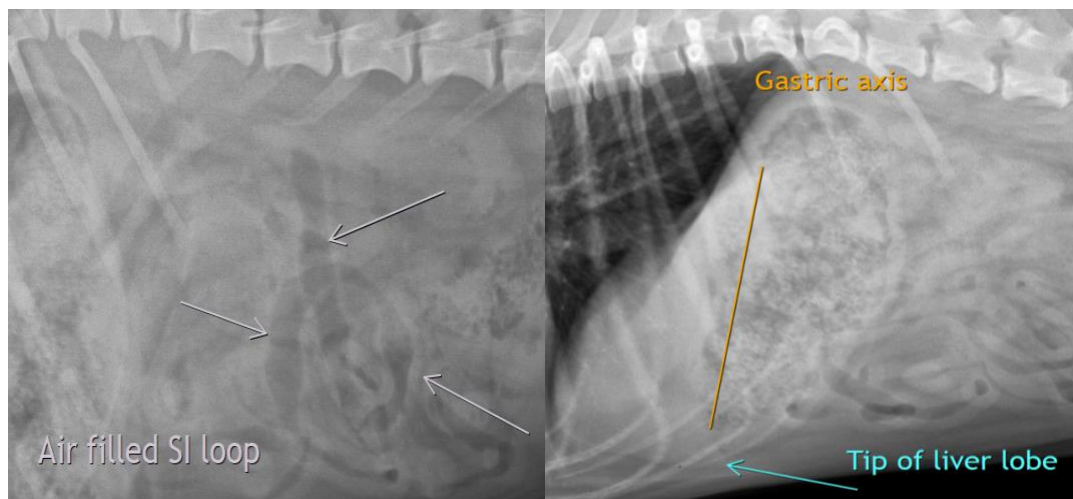
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PATIENT

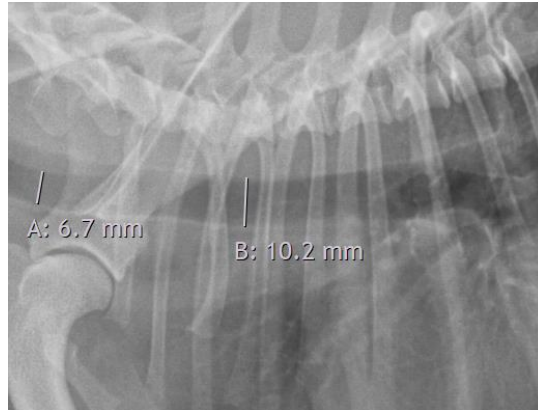
J. D. Leech

SPECIES

Canine

BREED

Pug



SEX

Neutered Male

AGE

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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