



PATIENT

Ziggy Engle

PRESENTING CLINICAL SIGNS

P presented for evaluation post-seizure activity. O's report they are unaware of the P having any previous seizures. O's report that P's mother had passed a result of seizure activity. O's believe the P had a cluster seizure, unsure of duration, and a large amount of severely odorous vomitus (they believe it might've been fecal).

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Increase in PLT (533/500) ALT (273) and ALP (193)

BREED

Chihuahua

RADIOGRAPHIC STUDY OF THE ABDOMEN

RLR, LLR, VD

RADIOGRAPHIC FINDINGS

The body condition score is 5/9.

SEX

The surrounding bony structures are within normal limits.

MN

Considering the low BCS, the abdominal detail is good; diaphragm and abdominal wall are intact.

AGE

16

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

The head of the spleen appears physiological.

INTERPRETED BY

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

The gastric axis is mildly rotated caudally and contains a moderate amount of air. On the lateral views the small intestinal (SI) loops in the cranial abdomen are slightly larger than in the caudal abdomen. Colon and rectum contain a moderate amount of fecal matter.

Both renal shadows have a physiological size, shape and opacity. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

HOSPITAL NAME

Boca Park Animal
Hospital

A prostatic shadow is not obvious.

The region of the sublumbar lymph nodes appears physiological.

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

Tifanie Silver

- Hepatomegaly, mild
- Variable size SI

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The variable size of the small intestine may be due to different filling but could also be caused by wall thickening which can result in vomiting. The hepatomegaly could be the result of fatty infiltrate (Diabetes mellitus, Cushing's disease), hepatitis, hepatic tumor or granulomatous infiltrate. Abdominal ultrasound may have to be followed by FNA of any abnormalities. A secondary shunt to explain the clinical signs is possible and should be looked for. Cross sectional imaging of the brain is recommended to rule out a mass or infarct.

DATE

8-30-21



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TECHNICAL COMMENTS

Rotation of both lateral views

SPECIES

Canine

BREED

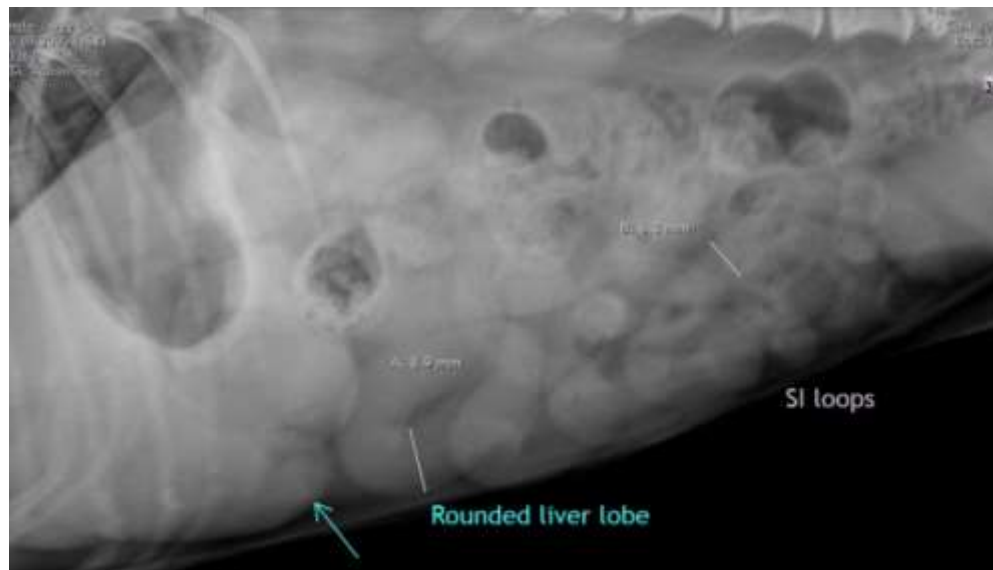
Chihuahua

SEX

MN

AGE

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REFERRING VET

Tifanie Silver

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.

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

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