



PATIENT

Storm Hernandez

PRESENTING CLINICAL SIGNS

P has been having diarrhea for the past 2 weeks also blood on the stools, O tried to change the food has got a little better. vomited a few times, last time was a few days ago but eating very well ok e/d/u no c/s Pet received 1 DHPP nd 1 pyrantal

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Radiographs- presence of small radiopaque spots in stomach, send for review recommended Fecal test and Giardia test disp Metro 100mg/ml 0.8ml BID for 7 days Provable DC SID for 10 days

BREED

French Bulldog

RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

Thorax: 2 orthogonal views
Abdomen: 3x lateral, 1x VD

RADIOGRAPHIC FINDINGS

SEX

Female

The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity.

Skeletal immaturity compatible with given age is noted, as well as an age-related reduction of serosal detail in the abdominal cavity. T5 is wedge shaped, L1 has a rib on the left and the tail is screwed. The sternum is angled ventrally resulting in an increased thoracic space caudally.

AGE

12 Weeks

Thorax

The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are visible. The bronchial tree tapers uniformly towards the periphery.

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T6. The tracheal air shadow increases in height from 0.4 to 0.6cm just cranial to the carina.

INTERPRETED BY

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

The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces (VHS 12). No chamber or outflow tract enlargement is evident.

Abdomen

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

The spleen is not apparent.

The stomach contains a mixture of fluid and air; the caudal wall appears thick. The small intestinal loops occupy the central abdomen and appear of homogeneous and physiological size. Colon and rectum contain a moderate amount of fecal matter.

One renal shadow has a physiological size, shape and opacity; the other one is obscured by intestinal loops. The bladder is located in the abdominal cavity and contains a small amount of homogeneous fluid opacity.

REFERRING VET

Dr. Elshafie

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DATE

9-13-21

The region of the sublumbar lymph nodes appears physiological.



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RADIOGRAPHIC DIAGNOSIS

- Impression of gastric wall thickening
- Congenital (wedge-, transitional-, block-) vertebral anomalies

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The lack of serosal detail makes it difficult to judge the gastro-intestinal tract and its outline. No obvious obstruction appears to be present but in puppies a transient, sliding intussusception is possible with infectious (viral) hypermotility. Abdominal ultrasound is recommended if the clinical signs reoccur. The impression of gastric wall thickening is most likely the result of little fat on the outer borders and fluid in the lumen. The tiny radiopaque speck is most likely the result of ingested material with a bit of calcium. H₂ blockers can be tried and combined with hypoallergenic food (possibly insects as protein source). Porridge can be fed to sooth the gastric walls.

SEX

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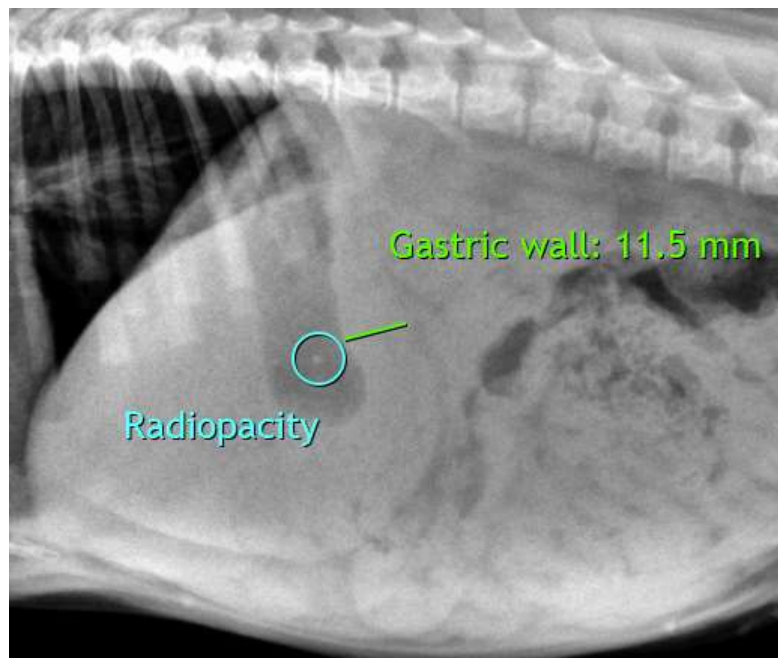
Heike Rudolf, DVM,
Dr. med. Vet.,
DipECVDI DVR

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

Dr. Elshafie



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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.

DATE

9-13-21

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