



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Bailey Riedel History: Episode of acute Vomiting and Diarrhea. Physical exam presented with a tense abdomen and grade 1 Lameness on the right hind. No pain was displayed during exam. Pulse: 130 Resp: 40 Temp: 101

**SPECIES** Abnormal PE/Chem/CBC/UA Results:

**Canine RADIOGRAPHIC STUDY OF ABDOMEN, PELVIS AND STIFLES**

**Abdomen:**

**BREED**

Australian Shepherd Mix

The body condition score is 8/9 with a large amount of retroperitoneal fat.

The bony structures are within normal limits.

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

**SEX**

Female

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

The spleen appears physiological.

**AGE**

9 Years 9 Months

The stomach contains some air and food; the small intestinal loops occupy the central abdomen and appear of homogeneous and physiological size. Colon and rectum contain a moderate amount of gas. The wall of the junction between colon and rectum is slightly increased (0.4cm vs 0.3cm).

**INTERPRETED BY**

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

The left renal shadow has a physiological size, shape and opacity; the surfaces appear to be smooth. The right kidney is mostly obscured by intestinal loops but does not appear enlarged. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

The region of the sublumbar lymph nodes appears physiological.

**HOSPITAL NAME**

Elizabeth AH

**Pelvis:**

The skin surfaces are smooth and the muscles appear to be symmetrically developed.

**REFERRING VET**

Kim Allyn, DVM

The skeletal structures are well mineralized, with physiological cortico-medullary development and differentiation.

The center of both femoral heads is located medial to the respective dorsal acetabular edge. The left lateral joint space is slightly widened with a small amount of new bone on the cranial effective acetabular edge. A tubular lucency runs along the left femoral neck.

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**Stifles:**

Both stifle joints have smooth subchondral bone surfaces. The cranial fat pad has a physiological size,

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though appears slightly less distinct on the right. The caudal fascial plains are in a physiological position. The popliteal sesamoid on the left is rudimentary. New bone formation is not evident and the left patella is located in its groove; on the right side the patella is superimposed onto the lateral condyle.

**SPECIES**

Canine

**RADIOGRAPHIC DIAGNOSIS**

**BREED**

Australian Shepherd Mix

- Mild HD with osteophyte left hip joint
- Rectal wall thickening
- Obesity

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

Female

I can see no changes that would explain the right sided lameness. The position of the patella is most likely due to positioning.

**AGE**

9 Years 9 Months

I can see no signs of obstruction. The wall thickening of the large intestine should be confirmed ultrasonographically and wall layering assessed. Colitis is the most likely diagnosis. Should vomiting and diarrhea not respond to conservative treatment, biopsies may have to be obtained.

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DipECVDI DVR



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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.**

**REFERRING VET**

Kim Allyn, DVM

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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**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
dr.h.rudorf@gmail.com

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Bailey Riedel

**SPECIES**

Canine

**BREED**

Australian Shepherd  
Mix

**SEX**

Female

**AGE**

9 Years 9 Months

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