



**PATIENT PRESENTING CLINICAL SIGNS**

Skye Parpis was very hyper last night and then today is falling over to the side - after P falls she kind of just lays there Nothing new was introduced or has happened Never done this before Yesterday was very anxious to go out Prior to incident was E/D/U/D OK - NO C/S/V/D

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Diag- BUN 34, Cre 1.4 CBC- WNL T4- 2.6 4DX test- Negative UA to UG Cysto lab- Pending

Canine

**RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN**

Thorax: RLR, LLR, 2x VD  
Abdomen: 2 orthogonal views

**BREED**

Mixed

**RADIOGRAPHIC FINDINGS**

The body condition score is 5/9 with smooth alternating layers of fat and soft tissue opacity.

**SEX**

The bony structures appear physiological.

FS

Thorax

**AGE**

The lungs are in contact with the thoracic boundaries and the tips are pointed. Multiple, roundish, soft tissue opacities with irregular borders are located along ribs 5 and 6 on the left.

1 Year

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5.

**INTERPRETED BY**

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

The cardiac silhouette occupies 75% of the chest height and 2.5 intercostal spaces. No chamber or outflow tract enlargement is evident.

Abdomen

**HOSPITAL NAME**

Animal Paradise  
Hospital

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

Liver as well as tail of the spleen are located well within the costal arch.

The spleen appears of physiological size and shape.

**REFERRING VET**

Dr. Mostafa Elshafie

The stomach contains a small amount of air. The small intestinal loops occupy the central abdomen and appear of homogeneous and physiological size; two intestinal loops to the left of L4-7 are air filled and slightly larger than the rest. Colon and rectum contain a small amount of formed fecal matter and gas.

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The renal shadows do not appear enlarged. The intraabdominally located bladder contains a moderate amount of homogeneous fluid opacity.

**RADIOGRAPHIC DIAGNOSIS**

**DATE**

9-2-21

- Alveolar infiltrate, localized
- Smallish liver



**PATIENT**

Skye Parpis

**SPECIES**

Canine

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**REFERRING VET**

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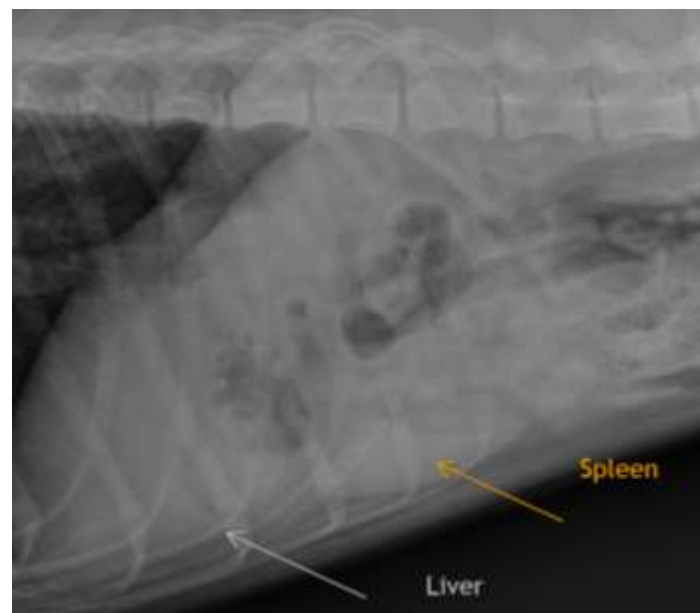
**DATE**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The pulmonary infiltrate could represent hemorrhage or edema. The distribution would be unusual for inflammation or infection. Granulomata e.g. parasites however, are a differential diagnosis. The changes could be the result of the fall (thus bleeding) or represent a separate entity. The smallish liver could be physiological for the long rib cage but could also represent a porto-systemic shunt.

The clinical signs suggest a neurological incident and stroke will have to be ruled out. Juvenile epilepsy is a differential diagnosis. Cross sectional imaging, preferably MRI, is recommended for clarification. Full biochemistry will help rule out a shunt. Pre- and post-prandial bile acids may be obtained for further diagnosis.





**PATIENT**

Skye Parpis

**SPECIES**

Canine

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.

**BREED**

Mixed

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Dr.H.Rudorf@gmail.com

**SEX**

FS

**AGE**

1 Year

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