



**PATIENT PRESENTING CLINICAL SIGNS**

Artie Church History: 3 month history of intermittent vomiting. Has been getting worse lately. Vomiting daily. Any additional comments: CBC/CHEM- normal other than ALT minor elevation 143 IU/L (12-118)  
Abnormal PE/Chem/CBC/UA Results:

**SPECIES RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN**

Canine The body condition score is 7/9 with with a slightly asymmetrical fat distribution on the lateral thoracic aspects.

**BREED**  
A separate bone center is present on the tip of the penis bone.

Golden Doodle

**SEX**  
The lungs are in contact with the thoracic boundaries and the tips are pointed. The caudal lobes the vessels are poorly outlined and the peripheral bronchi highlighted, resulting in a reticular pattern. The degree of pulmonary expansion is fair at best.

Neutered Male

**AGE**  
The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5. A very small amount of air is present in the esophagus level with C6/7.

6 Years

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

**INTERPRETED BY**

**Thorax**

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

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

**HOSPITAL NAME**

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

Paws & Claws UC

The spleen appears physiological with the tail located level with L4/5.

**REFERRING VET**

The stomach contains a moderate amount of food and is in a physiological position. The cranio-ventrally located, small intestinal loops appear stacked on the lateral view but have changed their position as well and diameter on the lateral view centered on the diaphragm. On both VD views one small intestinal loop is very straight and runs caudally in close contact with the right abdominal wall. Colon and rectum contain a moderate amount of fecal matter.

Dr. Bradshaw

**INVOICE**

Both renal shadows have a physiological size, shape and opacity; the surfaces are smooth. The bladder is located in the abdominal cavity and contains a small amount of homogeneous fluid opacity.  
13372 The region of the sublumbar lymph nodes appears physiological.

**DATE**

**RADIOGRAPHIC DIAGNOSIS**

9/30/21



**PATIENT**

Artie Church

- Straight intestinal loop
- Reticular interstitial pattern

Incidental finding

**SPECIES**

Canine

- Separate bone center at tip of penis bone

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**BREED**

Golden Doodle

The variation in small intestinal size and gas contents in association with a close contact to the abdominal wall of one of them could be related to a pancreatic problem. Even if amylase and lipase are physiological, chronic pancreatitis with fibrosis and adhesions may be present. Abdominal ultrasound is recommended to assess this region especially. Other caused for vomiting could be a low-grade gastritis and a fecal sample should be obtained to rule out giardia and other parasites. Dietary change may help in case of allergies. Should these steps fail to improve the vomiting, gastroscopy is recommended to obtain samples for histology.

**SEX**

Neutered Male

**AGE**

6 Years

The interstitial lung pattern is a non-specific finding and accentuated by the only fair expansion of the lung field. Possible differential diagnoses for a true infiltrate include:

- Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic)
- Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation)
- Fibrosis
- Tumor (e.g. lymphoma)

**INTERPRETED BY**

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

Should respiratory signs be present or develop, further evaluation by means of trachea-bronchoscopy with bronchoalveolar lavage may have to be considered.

**HOSPITAL NAME**

Paws & Claws UC

The separate bone center on the tip of the penis bone is only visible on one lateral view and could represent an artefact due to a superimposed structure or a physiological variation in the ossification of said bone.

**REFERRING VET**

Dr. Bradshaw

**INVOICE**

13372

**DATE**

9/30/21



**PATIENT**

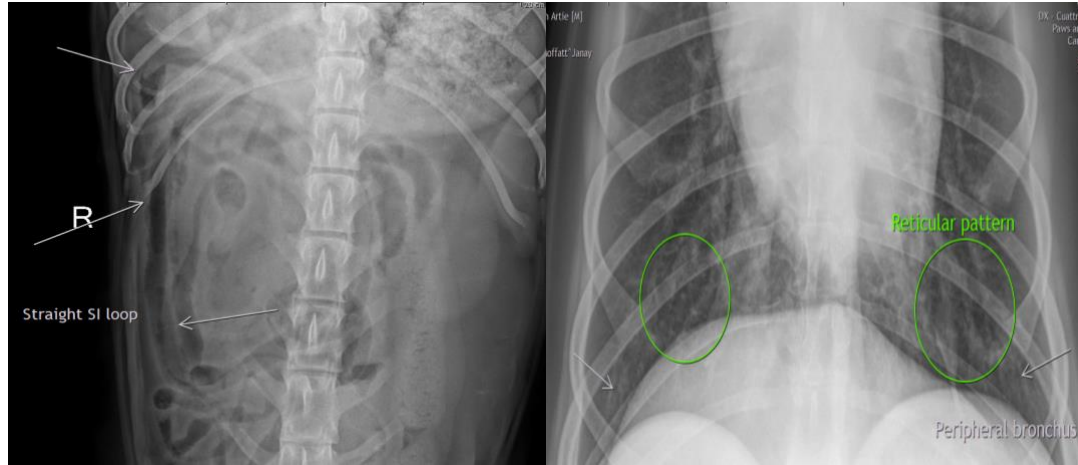
Artie Church

**SPECIES**

Canine

**BREED**

Golden Doodle



**SEX**

Neutered Male

**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.**

**AGE**

6 Years

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

**INTERPRETED BY**

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

**HOSPITAL NAME**

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**REFERRING VET**

Dr. Bradshaw

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