



PATIENT

Brandy Teixeira

PRESENTING CLINICAL SIGNS

Not eating or drinking for 2 days. Vomited twice in the clinic.
Abnormal PE/Chem/CBC/UA Results: Tense abdomen on palpation, pot belly, alopecic thin skin. Bloodwork Pending.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Right/left lateral and ventrodorsal whole body views totaling 6 images available for review.

BREED

Maltese Mix

RADIOGRAPHIC FINDINGS

Thorax

A fat opaque convexity appears to superimpose onto the thoracolumbar dorsum.

SEX

Female Spayed

Redundancy of the dorsal tracheal ligament is noted.

The radiographic presentation of the cardiac silhouette is within normal limits. The vertebral heart score is 10.5.

AGE

14 Years

There is no evidence of abnormal mediastinal widening.

A mild diffuse increase in interstitial pulmonary opacity is seen.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Abdomen

The patient is mildly obese.

The urinary bladder is moderately distended and in a relatively caudal position. Small mineral opacities superimpose onto the renal diverticuli of both kidneys.

HOSPITAL NAME

Truscott Animal
Hospital

Mild generalized hepatomegaly is seen.

There is moderate gastric aerophagia.

REFERRING VET

Erini Abraham

The small intestinal loops are of even diameter and evenly distributed throughout the mid abdomen however, they are turgid in appearance with a mildly discrepant gas pattern.

RADIOGRAPHIC DIAGNOSIS

INVOICE

48295

- Redundant dorsal tracheal membrane.
- Normal age related lung.
- No radiographic evidence of cardiovascular pathology.
- Gastrointestinal maldigestion pattern.
- Bilateral hypercalcemic nephropathy.
- Extensive subcutaneous fat deposits versus dorsal thoracolumbar subcutaneous lipoma.

DATE

11-12-21



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of mechanical ileus is seen; however, there is a gastrointestinal maldigestion pattern. Further definition by means of ultrasound could be considered depending on the duration and severity of the clinical signs.

Complementary laboratory workup is pending.

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.

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