



**PATIENT**

Laia Leduc

**SPECIES**

Canine

**BREED**

Italian Greyhound

**SEX**

F

**AGE**

6 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Balmy Beach Pet  
Hospital

**REFERRING VET**

Dr. Singh

**INVOICE**

48330

**DATE**

11-13-21

**PRESENTING CLINICAL SIGNS**

Inappetance for the past 2-3 days, active. Was vomiting, however that has subsided. Bloodwork was normal Repeated rads over 2 days, to compare. No contrast studies were done. A brief ultrasound exam was done, I found a focal area of the gut that appeared to be more fluid distended than the rest, though I could not identify any foreign material. I have 5 cine loops of the ultrasound as well, which I can submit if it's a part of the same study. Please let me know and I can submit the ultrasound images.  
Abnormal PE/Chem/CBC/UA Results: CBC normal Chemistry normal Leia is on Cerenia, Sulcrate, and Mirtazapine.

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Right/left lateral and ventrodorsal views totaling 3 images available for review.

**RADIOGRAPHIC FINDINGS**

The patient is in thin body condition.

The surrounding bony structures are within normal limits.

The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in position, size and presents uniform opacity.

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

The stomach is moderately distended with granulated material compatible with ingesta as well as a mild amount of gas and gravel.

The small intestinal loops are evenly distributed throughout the abdomen and present mild even dilation with predominance of a gas pattern with multiple small gas bubbles. No radiopaque foreign material. No evidence of plication is seen. The small intestinal loops are turgid in appearance.

The colon appears to be largely empty.

**RADIOGRAPHIC DIAGNOSIS**

- Gastric gravel.
- Functional small intestinal ileus.



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study reveals no direct evidence of mechanical small intestinal obstruction. The findings are suggestive for functional ileus rather than for mechanical obstruction. Subileus can never be ruled out entirely; however, there are no specific radiographic signs indicating an obstructive pattern.

**SPECIES**

Canine

The presence of gastric gravel is likely due to prior intake of mineral opaque material. A gravel sign, however, may also develop secondary to partial obstruction or delayed gastric outflow.

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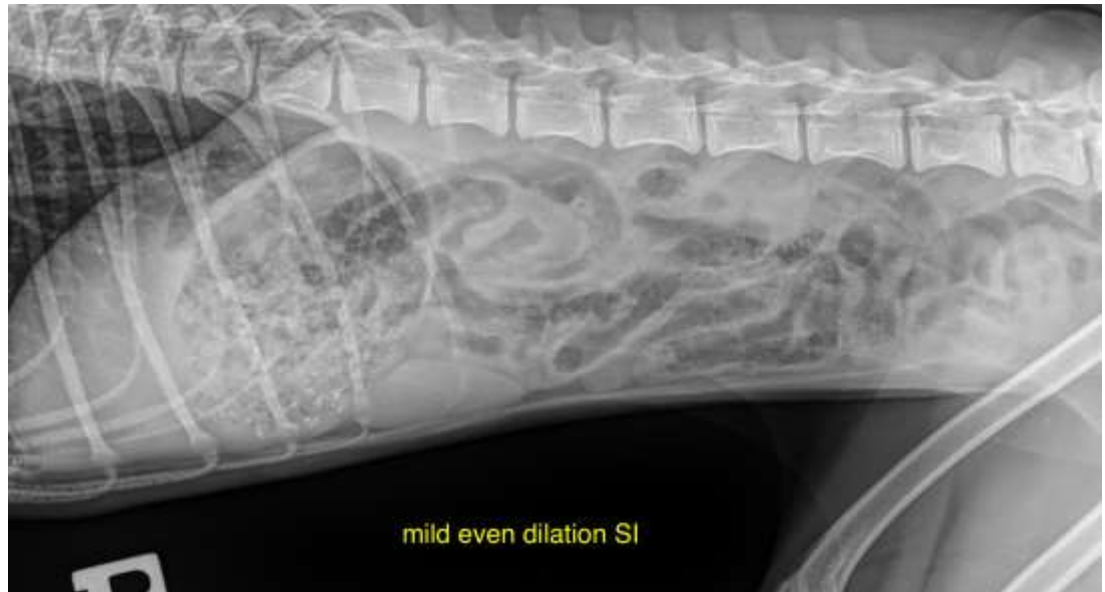
Depending on the severity and development of the patient's clinical signs, repeating and/or completing the abdominal ultrasound could be considered.

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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**

Dr. Singh

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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**Nele Eley, DVM, Dr. med. vet., DipECVDI**  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
Nele.Eley@sonopath.com

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