



**PATIENT PRESENTING CLINICAL SIGNS**

Piper Payton hx : Presented for recheck vomiting. She was seen yesterday for evaluation of edema around the neck region, vomiting and hyporexia. She was administered Cerenia and sent home with medications to treat suspected gastric ulcers. Piper has vomited twice today after receiving Carafate. Still not interested in food, only ate a small amount of yogurt this morning

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Blood chemistry: ALP < 10, CHOL 94, GLU 145

Canine Thoracic radiographs: bilateral pleural effusion A mild amount of abdominal fluid seen on U/S was aspirated. Abdominal fluid was milky white, it was examined and had protein of 4g/dL, USG 1.027. On microscopic evaluation, the fluid was composed of small lymphocytes, some neutrophils, no bacteria seen. The abd fluid had a CHOL value of 140. A thoracocentesis was performed under mild sedation. A total of 250mL were removed from the thoracic cavity, 100mL of light cream colored fluid was aspirated from the right and 150mL from the left side. US images were taken of the before and after thoracocentesis. Thoracic fluid had a protein value of 2.2g/dL and USG of 1.021.

**BREED**

Rat Terrier

**SEX**

FS

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN**

Plain and post contrast studies available for review.

**AGE**

3 Years

**COMPUTED TOMOGRAPHIC FINDINGS**

Subcutaneous soft tissue swelling with fat stranding is seen in the ventral and caudal neck.

**Thorax**

The cervical trachea presents mild dorsal flattening.

No significant cardiomegaly and no specific chamber enlargement of the heart is seen.

The cervical and mediastinal lymph nodes present minimally prominent.

The esophagus is dilated with a small amount of fluid.

There is a moderate amount of pleural effusion within both pleural cavities with bilaterally symmetric distribution.

The lung margins are retracted from the thoracic wall and rounded. Multiple peribronchial and ventral peripheral atelectatic changes are seen; however, no evidence of structural pulmonary pathology is noted.

**Abdomen**

A mild amount of free fluid is seen in the abdominal cavity and subcutaneous soft tissues ventral of the linea alba.

The stomach contains a moderate amount of fluid and a mild amount of gas. Mild generalized gastric wall thickening with maximum interrugal thickness of 5mm is seen. The layering of the gastric wall appears to be maintained throughout. No evidence of abdominal lymphadenomegaly is noted.

**INTERPRETED BY**

Nele Eley, DVM  
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**HOSPITAL NAME**

Aloha Pet & Bird  
Hospital

**REFERRING VET**

Dr. Rivera

**INVOICE**

48335

**DATE**

11-14-21

**PATIENT**

The liver, spleen, kidneys, adrenal glands, pancreas, and gallbladder all present within normal limits.

Piper Payton

**COMPUTED TOMOGRAPHIC DIAGNOSIS****SPECIES**

- Moderate bilaterally symmetric pleural effusion with hydrostatic pulmonary atelectasis.
- No evidence of a mediastinal mass.
- No evidence of pulmonary masses or nodules.
- Presumed gastritis.
- Mild peritoneal effusion.

Canine

**BREED**

Rat Terrier

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Based on the patient demographics and patient history, idiopathic chylothorax and chyloabdomen appear to be a potential. Cardiac pathology cannot be ruled out entirely by means of CT. If not performed already, a cardiac echo should complement the CT study. The possibility of infectious disease with hematogenous spread and infiltrative disease cannot be ruled out entirely with bicavitary effusion. Correlation with the laboratory values is recommended.

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The changes of the gastric wall are highly suggestive for gastritis. A neoplastic infiltrate is thought very unlikely based on the pattern of wall thickening and very mild changes.

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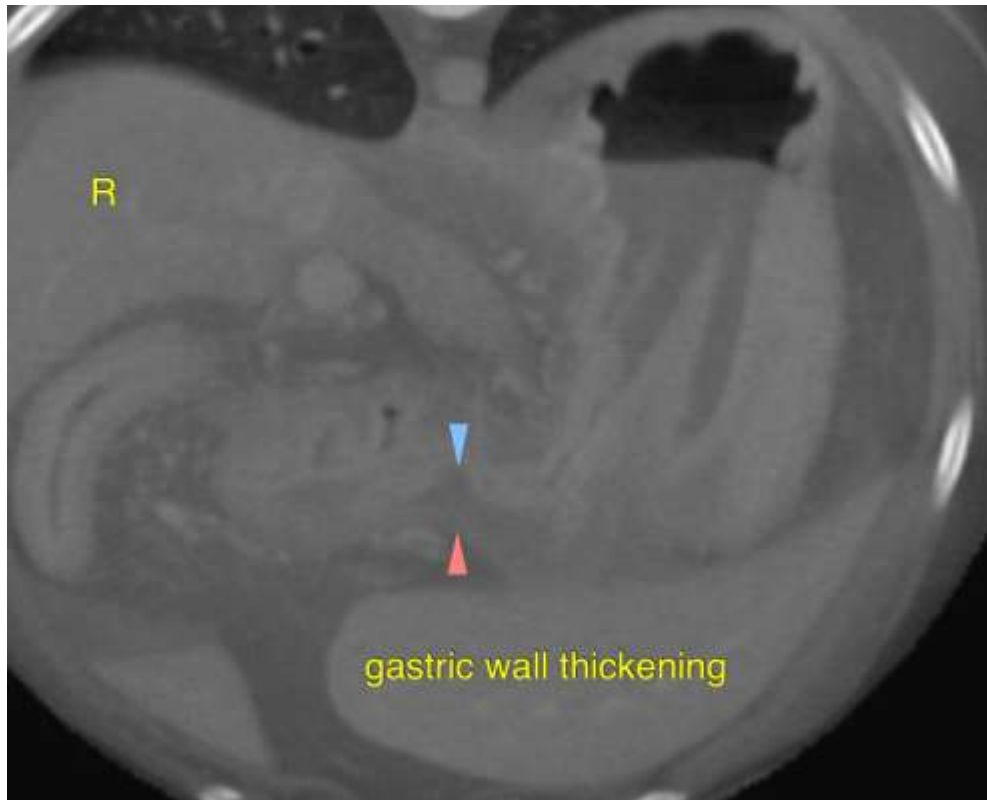
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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