

**PATIENT**

Coco Brownie Wells

**PRESENTING CLINICAL SIGNS**

Suspected PSS. Microhepatica, neurologic signs (improved since starting Lactulose and Metronidazole). Poor weight gain  
Abnormal PE/Chem/CBC/UA Results: Records from rDVM indicate increased LE and Bile Acids, although actual BW results not forwarded.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

Plain and post contrast studies available for review.

**BREED**

Yorkie

**COMPUTED TOMOGRAPHIC FINDINGS**

The liver is small in size. Intrahepatic portal vein branching is reduced. The gallbladder is distended with a large amount of fluid attenuating content. The gallbladder wall is thin.

**SEX**

FS

A single extrahepatic shunt vessel is originating from the splenic vein and courses in a long and tortuous loop dorsally to feed into the caudal vena cava from the left side level with the cranial pole of the right kidney. Maximum shunt diameter is 5mm. There is a short isthmus level with the shunt entrance into the caudal vena cava. The portal vein diameter decreased abruptly cranial of the shunt origin.

**AGE**

1 Year

Both kidneys present mild symmetric enlargement. There is no evidence of renal or urinary bladder calculi.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Single congenital extrahepatic portosystemic shunt.
- Microhepatica.
- Mild compensatory bilateral renomegaly.

**HOSPITAL NAME**

Wilson Veterinary  
Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT findings are consistent with a congenital extrahepatic portosystemic shunt. A single spleno-caval shunt is identified. Consider shunt closure by means of a slowly attenuating technique along with supportive medical and dietetic management.

**REFERRING VET**

Dr. Nicholas Vitale

**INVOICE**

48685

**DATE**

11-30-21



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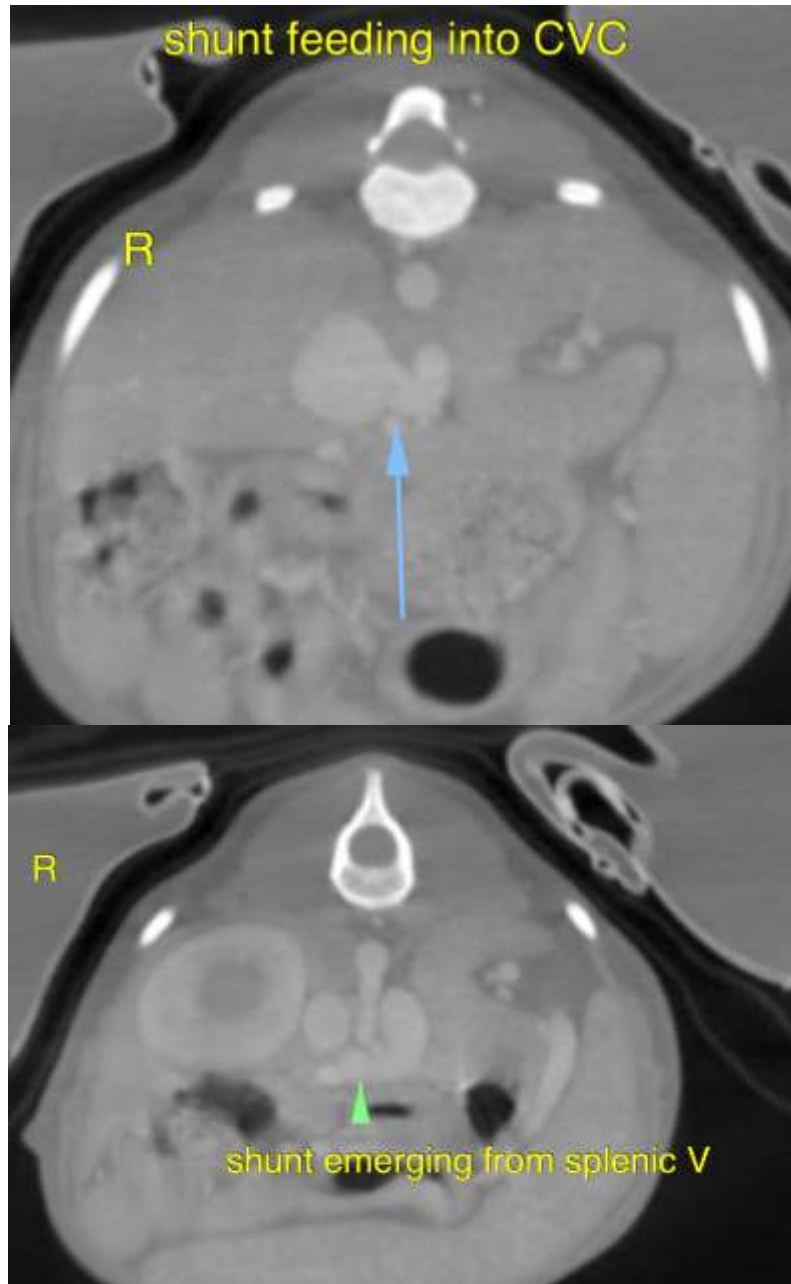
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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**

Yorkie

**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  
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