

**PATIENT**

Trigger Carpenter

SPECIES

Canine

BREED

Lab

SEX

MN

AGE

8 Years

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Northshore
Veterinary Hospital**REFERRING VET**

Kristin Williams

INVOICE

55078

DATE

11-8-22

PRESENTING CLINICAL SIGNS

Since the time of neuter at age 3, he has had urinary incontinence. It's slowly worsened over time, and now he's constantly leaking and dripping pee. Initially responded to proin, then that stopped working. Then responded to incurin, then that stopped working...

Abnormal PE/Chem/CBC/UA Results: Physical exam is normal beside being overweight. Prostate palpates normally. Urine is isosthenuric (rechecking first morning samples - pending). Bloodwork including cortisol level is WNL

RADIOGRAPHIC STUDY OF THE ABDOMEN

Lateral and ventrodorsal views of the abdomen totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

Number, alignment, and anatomy of the lumbar vertebrae and the lumbosacral junction present within normal limits.

There is marked gastrointestinal aerophagia with no evidence of malpositioning of the stomach and no evidence of segmental dilation of the small intestine.

The urinary bladder is small.

No evidence of prostatomegaly is seen.

There is no evidence of structural abnormality within the caudal abdomen or pelvic canal.

RADIOGRAPHIC DIAGNOSIS

- Normal radiographic presentation of the abdomen including urinary bladder and prostate, except for gastrointestinal aerophagia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gastrointestinal aerophagia is likely secondary to excitement and unlikely to be of clinical significance.

The urinary bladder was only mildly distended. No evidence of prostatomegaly and no other structural abnormality was seen in the caudal abdomen that would correlate with the patient's clinical signs.

The lumbar spine and lumbosacral junction present within normal limits.



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

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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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