



PATIENT

Aspen Barton

PRESENTING CLINICAL SIGNS

Hx of vomiting that progressed from food to hemorrhagic saliva. Vomiting began Sunday. Ate a small amount of food yesterday. No lethargy. She passed feces yesterday. The owner believes patient vomited string last night

SPECIES

Abnormal PE/Chem/CBC/UA Results: T - 102.9 HR - 230 Abdomen soft non-painful MM - pink<2 Financial constraints - no bloods performed at this time

Fe

RADIOGRAPHIC STUDY OF THE ABDOMEN

BREED

Right lateral and ventrodorsal views totaling 2 images available for review.

DSH

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

SEX

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

FS

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

AGE

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

1

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic tail is not seen.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

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.

HOSPITAL NAME

Torch Lake
Veterinary Clinic

The stomach is in its anticipated position and no evidence of radiopaque foreign material is seen within the stomach.

The small intestinal loops are positioned in tight curves with mildly eccentric gas pattern; however, no overt plication is seen. There is no segmental dilation and no radiopaque foreign material noted.

REFERRING VET

Adrienne Waffle

A mild amount of fecal matter is seen within the descending colon.

RADIOGRAPHIC DIAGNOSIS

- Small intestinal maldigestion pattern.
- No radiographic evidence of intestinal plication or mechanical obstruction.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

11-9-21

The radiographic study reveals no definitive plication. No segmental dilation is noted and there is no evidence of radiopaque foreign material. Linear foreign material may be occult in up to 30% of radiographs which is why this can never be ruled out entirely based on radiographs alone. However, no direct signs of small intestinal plication are noted at this time. There is no evidence of reduced serosal detail, no radiopaque foreign material, and no signs of mechanical ileus are



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noted. Consider either further narrow clinical monitoring versus abdominal ultrasound depending on the severity and duration of the patient's clinical signs.

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REFERRING VET

Adrienne Waffle

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.

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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.

DATE

11-9-21

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