



PATIENT

Marshall Wise

PRESENTING CLINICAL SIGNS

Chronic colitis, Hx of GI issues- responsive to Metronidazole

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies available for review.

BREED

Labradoodle

COMPUTED TOMOGRAPHIC FINDINGS

Three wire shaped metal attenuating foreign objects are seen in the cranial abdomen. The first measures approximately 15mm in length and is embedded in the cranioventral wall of the pyloric antrum. No peripheral mesenteropathy is seen. The second is at the mesenteric side of the gastric outlet and the cranial aspect of the foreign object appears to be embedded in the wall of the gastric outlet. No evidence of regional mesenteropathy is seen. However, mild generalized enlargement of the pancreas with slightly irregular margins accentuating the pancreatic base is present. A third 11mm long metal attenuating foreign object is seen freely within the cranial abdomen ventral of the descending duodenum adjacent to the caudal margin of the left lateral liver lobe. No evidence of regional peritonitis is seen.

SEX

Male Neutered

AGE

11 Years

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Occasional hyperenhancing splenic nodules are present.

A small 4mm sized parenchymal cyst is seen in the cranial division of the liver.

HOSPITAL NAME

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The small and large intestine present within normal limits. No evidence of a mass or generalized wall thickening of the colon is seen. The lymph nodes of the colon and the medial iliac lymph nodes present within normal limits.

The bony and surrounding soft tissue structures reveal no abnormalities.

REFERRING VET

Meaux

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Three short wire type foreign objects in the cranial abdomen, two of which associated with the stomach/gastric outlet.
- Small uncomplicated parenchymal cyst of the liver.
- Hyperenhancing splenic nodules.
- Normal presentation of the colon and small intestine.
- Suspect pancreatopathy.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

2-2-22

Presence of short wire type foreign objects in the abdomen is common and typically not of clinical significance. However, two of the three foreign objects in the cranial abdomen of this patient appear to be in contact with the gastric wall/ wall of the gastric outlet. No regional mesenteropathy is seen however they may have caused pain when migrating through the gastrointestinal tract's wall. Consider (traumatic) pancreatitis a potential.



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No structural lesions of the small or large intestine were identified.

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The splenic nodules are likely to represent benign nodular hyperplasia or myelolipomas. Secondary neoplastic infiltrate is considered unlikely but cannot be ruled out entirely.

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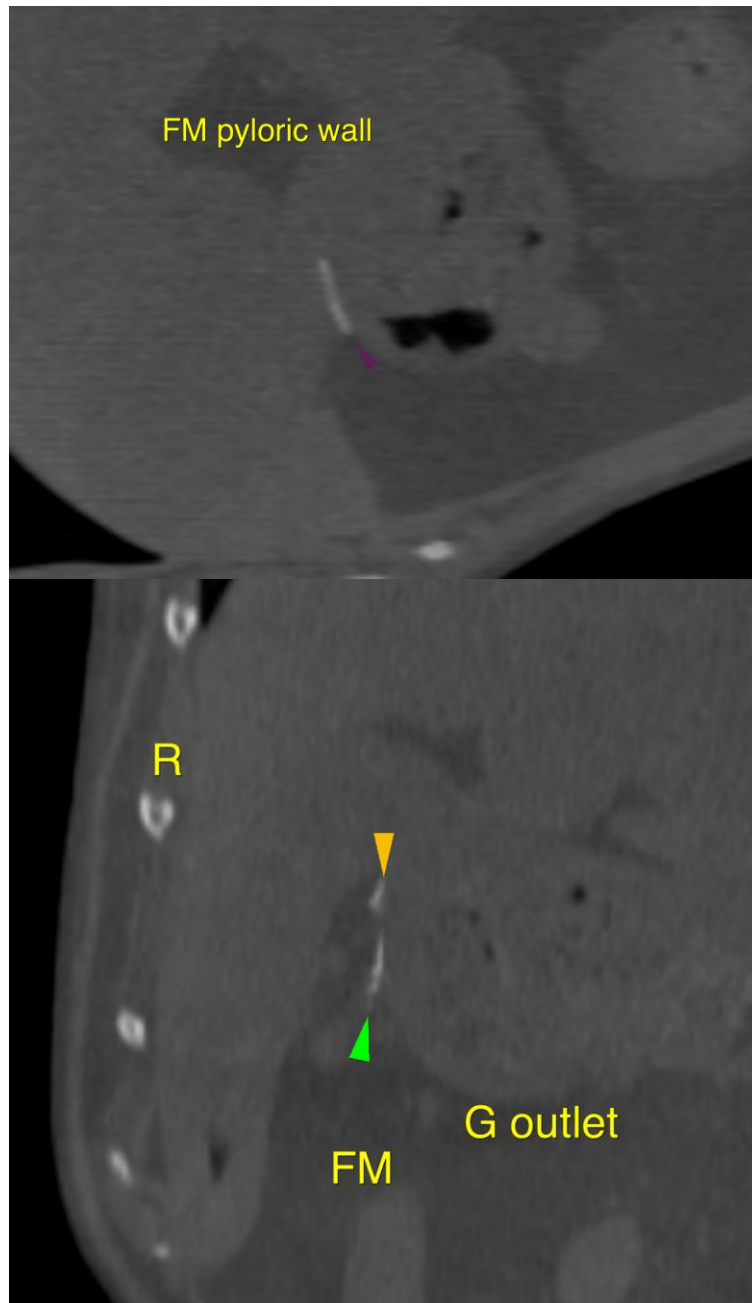
Meaux

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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.

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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