

PATIENT

Kevin Polychronis

PRESENTING CLINICAL SIGNS

lethargic, not eating. Has history of chronic, intermittent pancreatitis.
Abnormal PE/Chem/CBC/UA Results: SNAP cPL test strongly abnormal

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right/left lateral and ventrodorsal views totaling 3 images available for review.

BREED

Miniature Pinscher

RADIOGRAPHIC FINDINGS

The patient is obese.

The abdominal cavity is voluminous. Ventral and lateral abdominal walls are pendulous.

SEX

MN

The abdominal serosal detail is reduced in the cranial abdomen.

Liver and splenic margins are rounded.

AGE

11 Years

There appears to be ventral and lateral deviation of the descending duodenum without a clearly recognizable mass. The small intestinal loops are turgid in appearance with predominance of a gas pattern and mild corrugation.

The colon is largely empty and presents corrugation as well.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Suspect cranial abdominal peritonitis with findings accentuated in the region of the pancreatic base.
- Hepatopathy and splenopathy with mildly rounded organ contours.
- Small and large intestinal maldigestion pattern.
- Obesity.

HOSPITAL NAME

Pinebrook Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are suggestive for presence of inflammation or fluid within the cranial abdomen. The changes are accentuated in the position of the pancreatic base. Pancreatopathy such as pancreatitis, pancreatic abscess, cyst or other is one potential explanation for the radiographic changes. However, gastroenteropathy, hepatopathy, and other cannot be ruled out as potential differential diagnoses.

REFERRING VET

Dr. Britt Dubil

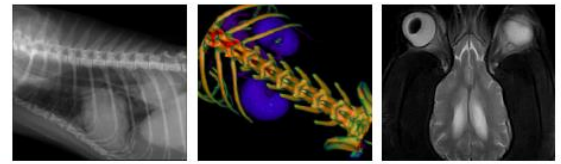
INVOICE

50463

The gastrointestinal changes suggest presence of functional ileus. Further definition by means of abdominal ultrasound is strongly recommended in this patient.

DATE

2-21-22



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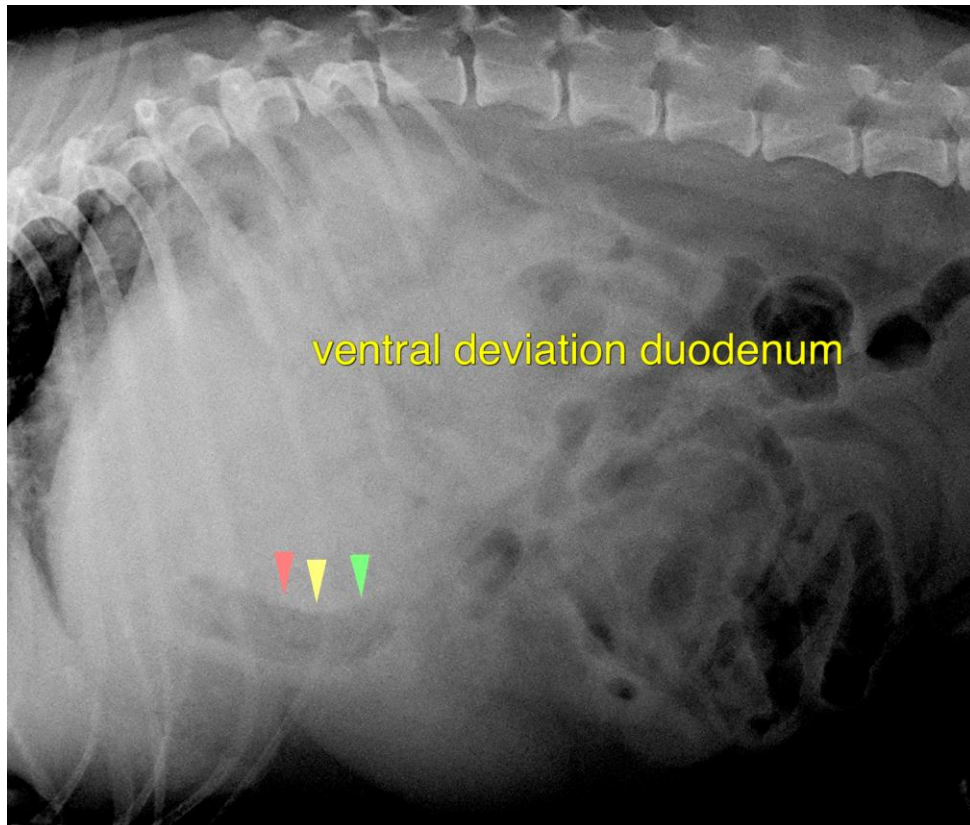
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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