



PATIENT

Frankie Burton

PRESENTING CLINICAL SIGNS

Lethargic this morning and has not been eating well. Pain during palpation of lumbar vertebrae, 7% dehydration.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right/left lateral and ventrodorsal views of the abdomen totaling 6 images available for review.

BREED

Dachshund
Longhaired

RADIOGRAPHIC FINDINGS

The abdominal serosal detail is maintained.

The stomach is postprandial. A moderate amount of gas and a mild amount of gravel are seen in the stomach.

SEX

Spayed Female

The small intestinal loops are evenly distributed throughout the mid abdomen with no evidence of abnormal dilation, plication, or radiopaque foreign material.

The spleen and kidneys present within normal limits.

AGE

15 Years

The urinary bladder and liver present within normal limits.

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

In situ mineralization of the L3/4 intervertebral disc is seen.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Gastric aerophagia and gravel – otherwise normal radiographic presentation of the abdomen.
- Chondroid disc degeneration L3/4.

HOSPITAL NAME

Truscott Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gastric aerophagia may be an indicator of pain, general excitement, or gastropathy. The gravel is likely to be due to prior intake of small amounts of gravel or other mineral material. There is no evidence of abnormal dilation of the stomach in terms of a true “gravel” sign. Full neurologic examination could be considered in the further workup of this patient as well as full abdominal ultrasound depending on the clinical correlation.

REFERRING VET

Dr. Medhat Meawad

INVOICE

57213

DATE

3-13-23



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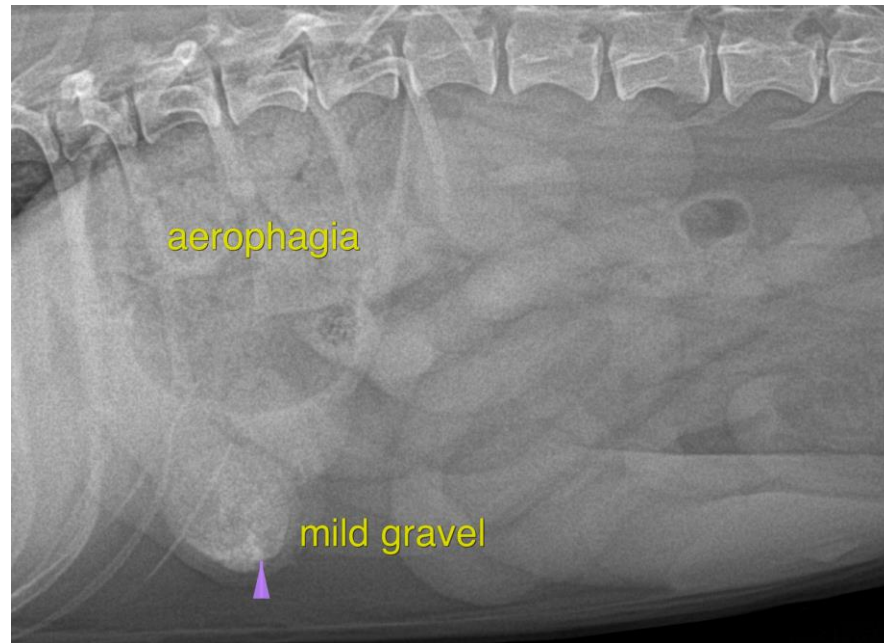
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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