



PATIENT

Diggs Burse

PRESENTING CLINICAL SIGNS

The owner stated that the last 2 nights the dog vomited 2-3 times each night. No any vomiting during the day. Normally eating and drinking. Normal energy level. Playing with other dogs. Defecated this morning, and defecated while leaving the examining room. No any abdominal pain on palpation. Everything looks fine.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right/left lateral and ventrodorsal views of the abdomen totaling 5 images available for review.

BREED

Mastiff

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

SEX

Male

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

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

AGE

7 Months

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

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

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

St. Catherine's Animal
Hospital

The stomach contains a moderate amount of gas and fluid. No abnormal dilation or malpositioning of the stomach is seen. There is no evidence of radiopaque gastric foreign material.

The small intestinal loops appear to be evenly distributed throughout the mid abdomen. They are mildly turgid in appearance yet there is no evidence of abnormal dilation, plication, or radiopaque foreign material.

REFERRING VET

Dr. Dragan Gunj

A dilated gas filled loop is seen consistently throughout all images in the right cranial abdomen which is likely to represent the ascending colon. A moderate amount of fecal matter is seen in the caudal half of the descending colon and cecum.

RADIOGRAPHIC DIAGNOSIS

- Gastrointestinal maldigestion pattern with no radiographic signs of mechanical ileus.

INVOICE

57455

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

3-27-23

The radiographic study reveals no evidence of mechanical small intestinal ileus. Subileus remains a potential however functional / paralytic ileus is considered more likely based on the radiographic presentation.



PATIENT

Diggs Burse

The gas dilated loop in the right cranial abdomen is likely to represent the ascending colon. A small intestinal sentinel loop cannot be ruled out entirely but appears by far less likely.

Further definition by means of recheck radiographs or abdominal ultrasound could be considered in case of persisting/reoccurring clinical signs in this patient.

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REFERRING VET

Dr. Dragan Gunj

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.

INVOICE

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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

DATE

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