



**PATIENT**

Wicket Hawkins

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Wilson Veterinary  
Hospital

**REFERRING VET**

Dr. Hawkins

**INVOICE**

57459

**DATE**

3-27-23

**PRESENTING CLINICAL SIGNS**

Pet presented for fever and vomiting on 3/25. Abdominal ultrasound 3/25 revealed an gas artifact and pain localized to the right caudal abdomen, otherwise no obvious cause of vomiting. Wicket had abdominal exploratory surgery in September 2022 for toothpicks that were ingested with a sub sandwich, and eventually one of the toothpicks migrated through the left body wall. Concern for abscess related to this previous migrating foreign body.

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

Plain and post contrast studies available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

Mild generalized enlargement of the liver is noted. The hepatic parenchyma is within normal limits regarding its attenuation and enhancement.

Moderate generalized gallbladder wall edema is noted. The gallbladder is moderately distended with uniformly fluid attenuating content. The cystic duct and common bile duct are dilated. Moderate generalized dilation of the common bile duct from the portal hilus to the duodenal papilla at an average diameter of 10mm is seen. No mechanical obstruction is seen at the duodenal papilla.

Mild generalized wall thickening of the gastric and duodenal wall is noted.

There is a minimal amount of free peritoneal effusion accumulating in the caudal abdomen.

Mild gastroduodenal lymphadenomegaly and mesenteropathy is seen.

The layers of the abdominal wall present within normal limits.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Minimal peritoneal effusion.
- Gallbladder wall edema.
- Moderate generalized dilation of the common bile duct.
- Mild hepatomegaly.
- Mild gastroduodenal lymphadenomegaly and mesenteropathy.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Residuals of foreign material cannot be identified in the CT study. There is however evidence of cholangitis / cholangiohepatitis and cholecystitis with common bile duct dilation. Mechanical obstruction cannot be identified. Concurrent gastritis and duodenitis are seen as well as regional lymphadenitis and mesenteritis. Inflammatory/infectious disease is considered most likely as underlying cause of the CT changes. Mechanical obstruction by means of foreign material or a mass cannot be identified.



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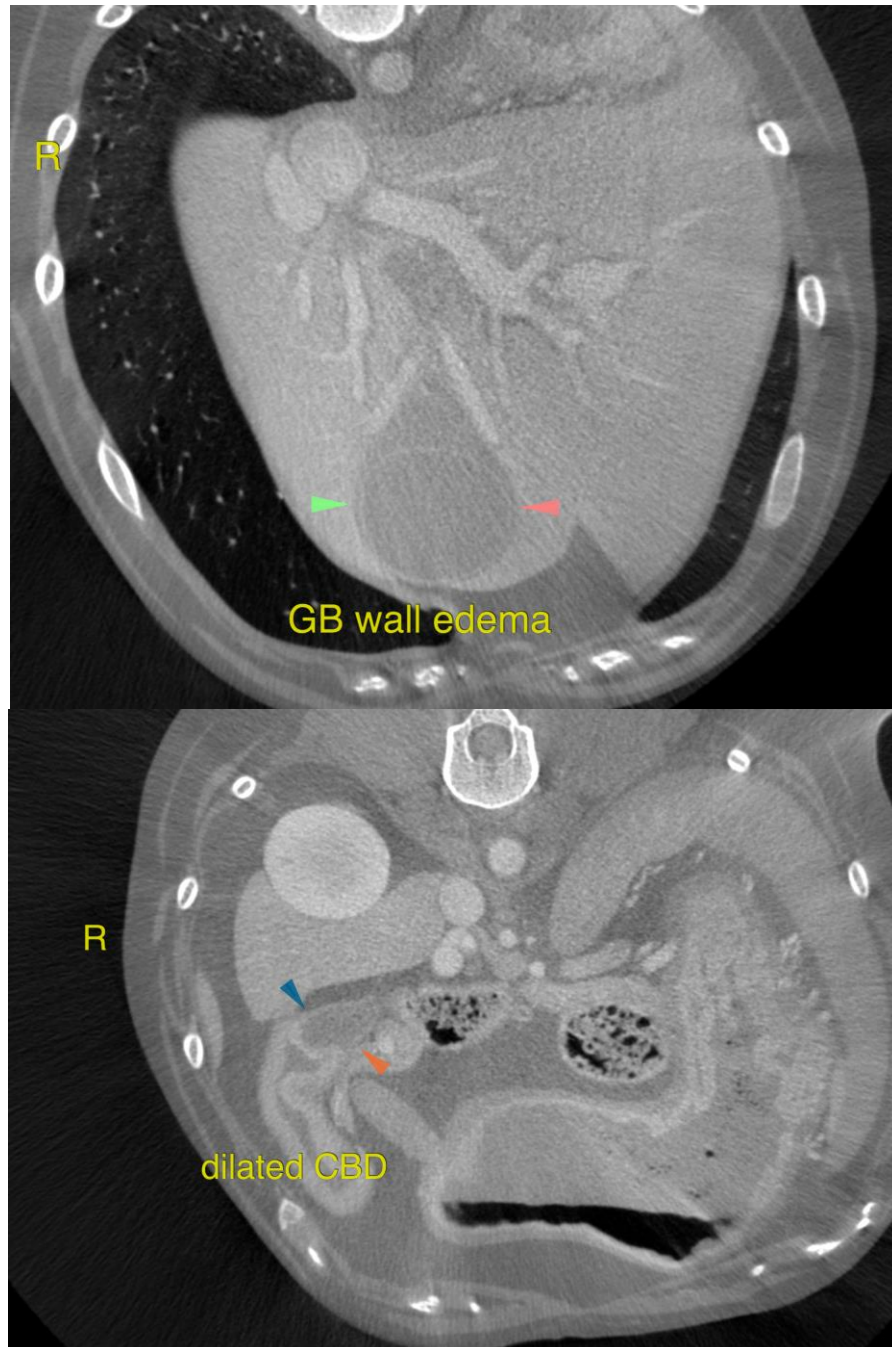
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

Golden Retriever

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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