



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Yaga Bryl  
**SPECIES** Canine  
**BREED** Mixed  
**SEX** Spayed Female  
**AGE** 8 years

Yaga is an 8 year old spayed mixed breed dog presented for a physical exam. As per the owner's statements: -vomited yesterday morning and again today -- On Sunday (April 17) night chewed on a big beef bone for over an hour, fell asleep - Next morning Monday (April 18) vomited yellow bile once - Has not been interested in eating since - drinking a bit of water - had a small bowel movement this afternoon. It was soft and orange in colour (owner has a sample) - lethargic, laying down, not interested in anything. -would like to have right nostril checked as well -no coughing or sneezing

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Right/left lateral and ventrodorsal views totaling 4 images available for review.

**RADIOGRAPHIC FINDINGS**

L2/3 spondylosis deformans, vertebral end plate sclerosis, and mild intervertebral disc space narrowing are present.

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.

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.

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.

A mild amount of gas is seen within the stomach.

The small intestinal loops presents predominance of a gas pattern with turgid appearance. No evidence of abnormal dilation, plication, or radiopaque foreign material is seen.

The colon is mostly empty except for a mild amount of gas and fecal matter.

**RADIOGRAPHIC DIAGNOSIS**

- Gastrointestinal maldigestion pattern.
- No radiographic evidence of mechanical ileus.
- Spondylosis deformans L2/3.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study reveals signs of functional gastrointestinal ileus. No evidence of mechanical obstruction is identified radiographically. Gastroenteritis, pancreatopathy, hepatopathy, and other are potential causes for the patient's clinical signs.

**INTERPRETED BY**

Nele Eley, DVM  
 Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Beaches-Fallingbrook  
 Veterinary Clinic

**REFERRING VET**

Dr Matt Haghightat

**INVOICE**

51637

**DATE**

4-19-22



**PATIENT**

Yaga Bryl

Further definition by means of a full internal medicine workup including abdominal ultrasound could be considered in case of persisting or deteriorating clinical signs.

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**BREED**

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**SEX**

Spayed Female

**AGE**

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**INTERPRETED BY**

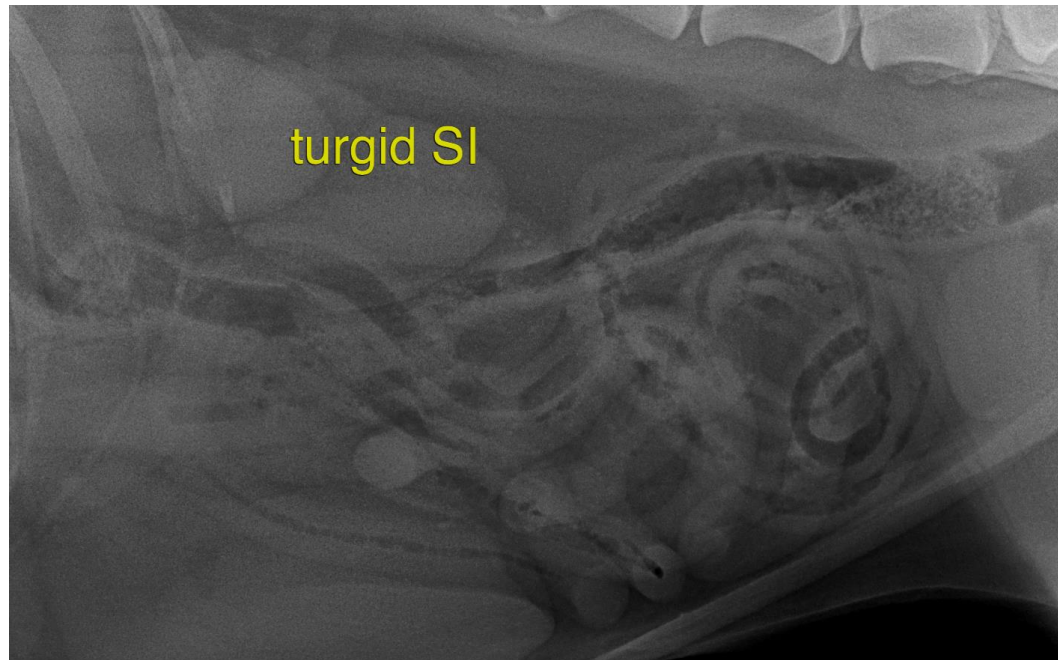
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Veterinary Clinic

**REFERRING VET**

Dr Matt Haghighat



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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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Nele.Eley@sonopath.com

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