



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Ginger Rebolledo Reason for Visit: P presented for more difficulty defecating. History: P presented for more difficulty defecating for some time now, P will defecate every day but it just takes her a longer time than usual. Still e/d well, owner noticed weight loss over last few months.

SPECIES Abnormal PE/Chem/CBC/UA Results: Mentation: BAR EENT: OU NS. AU clear, no debris. No cough on tracheal palpation. Oral cavity: Difficult to exam - almost all teeth missing Lymph Nodes: Submandibular, prescapular and popliteal lymph nodes normal size, shape and consistency. Skin: No ectoparasites seen. Alopecia on head/limbs (present for years per owner). CV/Respiratory: No obvious murmurs or abnormal lung sounds over trembling. Abd/GI: Tenses on palpation, no fluid wave, no palpable masses or organomegaly. Rectal exam = large amount of soft/formed stool removed from colon Uro/Perineum: No lesions or abnormalities.

BREED Chihuahua Musculoskeletal: BCS = 3/9. Ambulatory x 4, stiff gait. Neurological: Alert and appropriate. No deficits noted

SEX RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

AGE The patient is in very thin body condition.

14 Years The abdominal serosal detail is reduced likely secondary to the lack of peritoneal and retroperitoneal fat.

INTERPRETED BY

Nele Eley, DVM Collapse of the intervertebral disc spaces T11/12, T12/13, T13/L1, and L1/2 is seen with Dr. med. Vet. DipECVDI ventrally bridging spondyloses between T11/12 and T12/13.

The stomach is post-prandial.

HOSPITAL NAME

The small intestinal abnormality is seen.

DPC Veterinary Hospital The colon presents moderate generalized dilation with a large amount of fecal matter which extends into the rectum.

There is no mass effect or stenosis within the abdomen or pelvic canal noted.

REFERRING VET

Dr. Oldenhoff **RADIOGRAPHIC DIAGNOSIS**

- Coprostasis
- Thin body condition
- Chronic intervertebral disc disease within the caudal thoracic and cranial lumbar spine.

INVOICE

51838 **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

DATE

4-30-22 The radiographic findings are consistent with the history of constipation. No evidence of mechanical obstruction of the colon, caudal abdomen, pelvic canal, or perineum is seen. Presence of perineal hernia cannot be ruled out. Correlate with the rectal exam.

Megacolon, dehydration, dietetic management, and neuromuscular disease are potential other



PATIENT

Ginger Rebolledo

causes of the constipation. Neurologic disease other than neuromuscular appears unlikely since lower motor neuron signs of the hind limbs are typically associated with fecal incontinence rather than constipation. However, pain with arbitrary retention of the feces cannot be ruled out.

SPECIES

Canine

BREED

Chihuahua

SEX

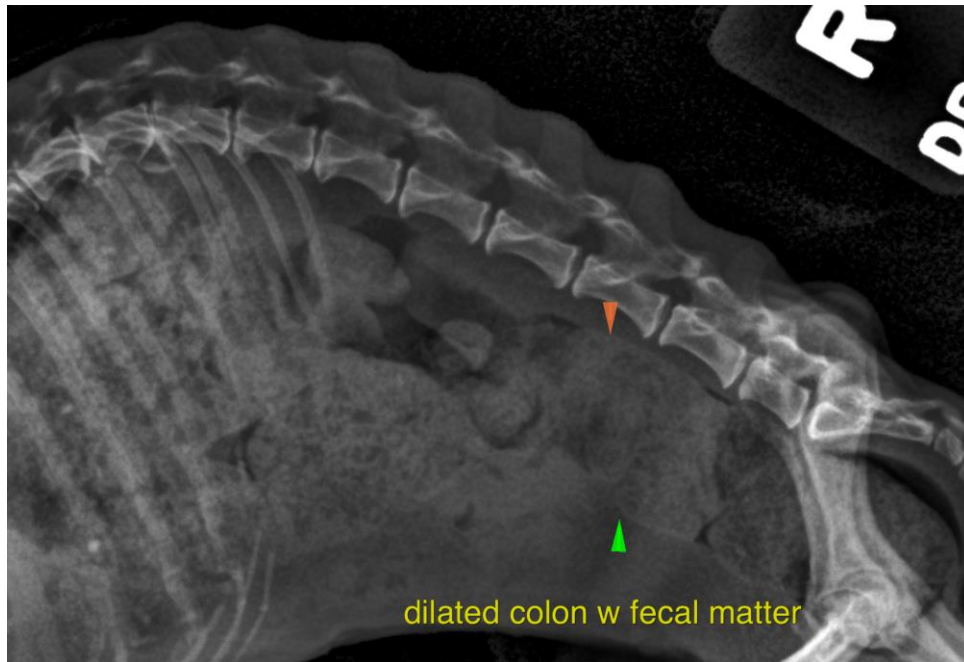
SF

AGE

14 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI



HOSPITAL NAME

DPC Veterinary
Hospital

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.

REFERRING VET

Dr. Oldenhoff

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