



PATIENT

Titan Cabrer

SPECIES

Canine

BREED

Bull Mastiff

SEX

M

AGE

9W

WEIGHT

21.4lbs

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

José L. Alvarado Bruno,
CVT - CT Scan Technician

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Franco Ortiz, DVM

INVOICE

74938

DATE

5-8-26

PRESENTING CLINICAL SIGNS

The patient presents for medical evaluation due to a history of hematuria. Bloodwork findings reveal mild to moderate anemia and mildly elevated ALT levels. Ultrasound examination demonstrates significant sediment accumulation within the urinary bladder. Radiographs show microhepatica. The patient is referred for CT imaging due to suspicion of a portosystemic shunt.

Abnormal PE/Chem/CBC/UA Results: CBC --- RBC mild decreased (5.13), HCT moderate decreased (28.1), HGB moderate decreased (9.9), RETIC-HGB mild increased (21.0), MONO mild increased (1.57), EOS mild increased (1.73) CHEM --- ALT mild increased (77)

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The liver is markedly reduced in size (microhepatica) with poor overall hepatic volume.

A single intrahepatic portosystemic shunt is identified arising from the left divisional intrahepatic portal branch with anomalous vascular communication bypassing normal parenchymal perfusion and draining into the caudal vena cava level with the diaphragm through the dilated hepatic veins. The shunt vessel is clearly visualized and consistent with a congenital intrahepatic portosystemic shunt of the left divisional type.

Both kidneys are mildly enlarged. Renal architecture is otherwise preserved without evidence of obstructive uropathy.

The urinary bladder contains a moderate amount of mineral attenuating sediment consistent with ammonium urate deposition. No discrete obstruction is identified.

There is no evidence of free abdominal fluid.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Single congenital intrahepatic portosystemic shunt: left divisional branch.
- Microhepatica: consistent with chronic portal hypoperfusion.
- Mild bilateral renomegaly.
- Moderate urinary bladder sedimentation: consistent with ammonium urate crystalluria secondary to portosystemic shunting.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings are diagnostic for a single congenital intrahepatic portosystemic shunt originating from the left divisional portal branch which explains the clinical signs and laboratory changes.

Specialist consultation for surgical or interventional shunt attenuation can be considered. Medical and dietetic management is recommended prior to intervention.



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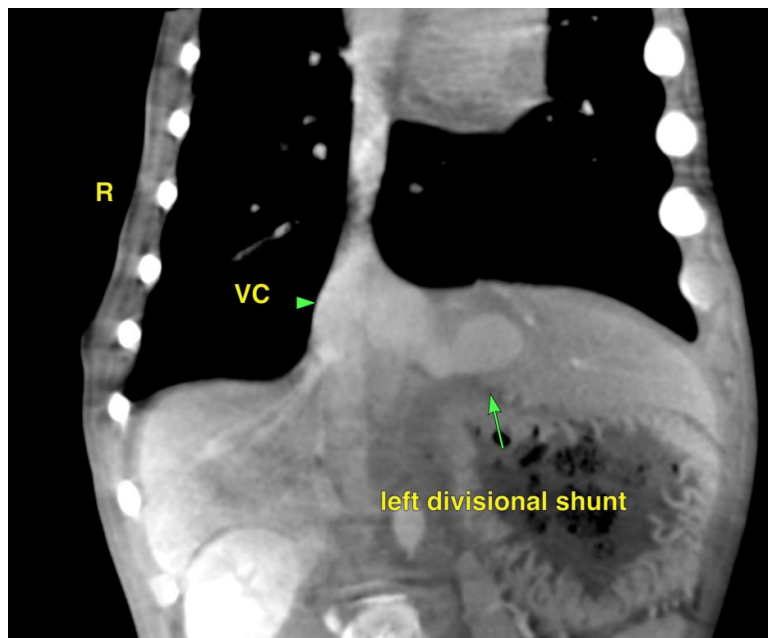
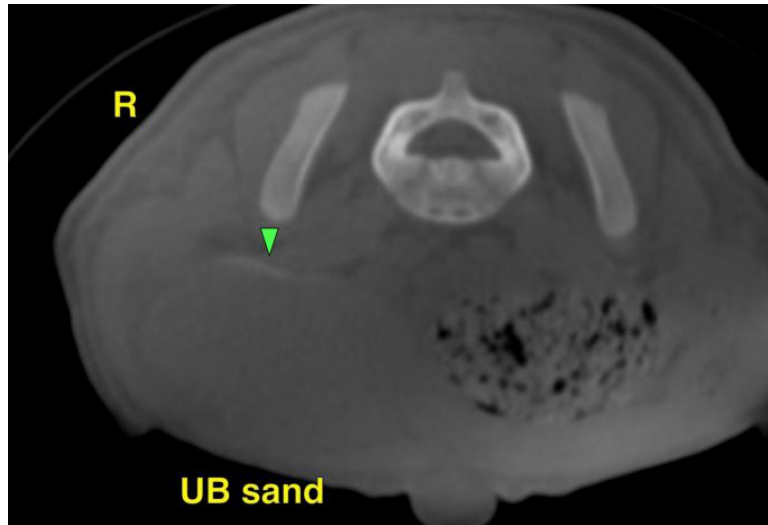
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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