



**PATIENT PRESENTING CLINICAL SIGNS**

**Axel Roush** Possible liver shunt- p has been sick on / off since a puppy.  
 Abnormal PE/Chem/CBC/UA Results: Bile acids 59.8, post 281.1 Protein C pending Ultrasound report attached.

**SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

**Canine** Plain and post contrast studies available for review.

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

**Beagle** The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**SEX** Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

**Neutered Male** Multiple small mineral attenuating calculi are seen within the urinary bladder.

**AGE** The adrenal glands are within normal limits for size, shape and organ architecture.

**3 Years** The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**INTERPRETED BY** A single intra- or extra-hepatic portosystemic shunt is not seen. However, multiple tortuous vessels emerging from the mesenteric and splenic veins appear to connect to the caudal vena cava level with the kidneys in a tortuous course.

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

The liver is of normal size. The liver margins are slightly irregular. The parenchymal enhancement pattern is diffusely heterogenous. The gallbladder is moderately distended with uniformly fluid attenuating content.

**HOSPITAL NAME** The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

Mobile Pet Imaging

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

**REFERRING VET** The bony and surrounding soft tissue structures reveal no abnormalities.

Meaux

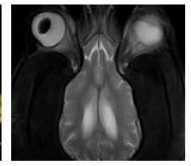
**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- INVOICE**
- Hepatopathy with multiple acquired portosystemic collaterals.
  - Cystitis with urinary microlithiasis – likely ammonium urates.

54294

**DATE**

9-26-22



**PATIENT INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS**

**AXEL ROUSH** A congenital portosystemic shunt is not seen. The findings however do support the presence of hepatopathy with portal hypertension and multiple acquired extrahepatic portosystemic shunts. Differential diagnosis includes primary biliary cirrhotic hypertension, vascular dysplasia, chronic hepatitis, and hepatic fibrosis. Consider liver biopsies for further definition.

**SPECIES**

Canine

**BREED**

Beagle

**SEX**

Neutered Male

**AGE**

3 Years

**INTERPRETED BY**

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**HOSPITAL NAME**

Mobile Pet Imaging

**REFERRING VET**

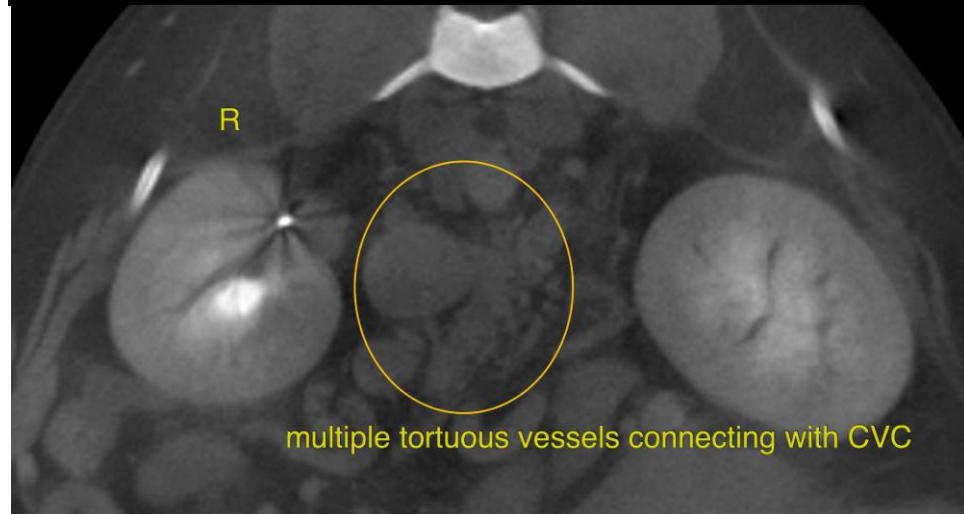
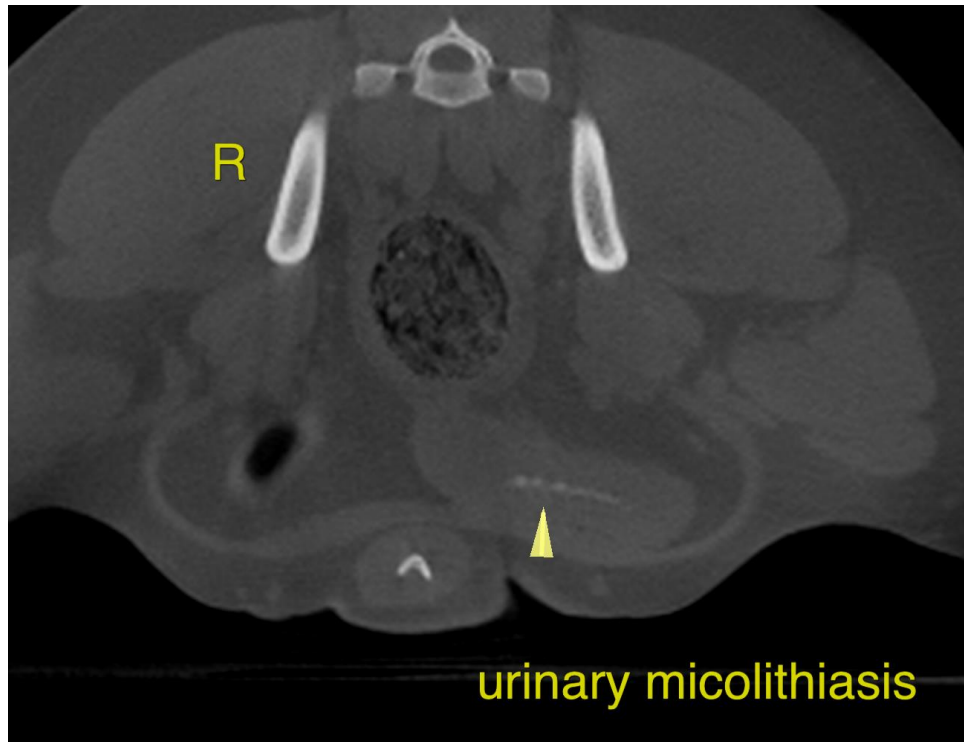
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**PATIENT**

Axel Roush

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.

**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**

Beagle

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**SEX**

Neutered Male

**AGE**

3 Years

**INTERPRETED BY**

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DVM Dr. med. vet.,  
DipECVDI

**HOSPITAL NAME**

Mobile Pet Imaging

**REFERRING VET**

Meaux

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