

**PATIENT**

Buddy Cahill

**SPECIES**

Canine

**BREED**

Maltese

**SEX**

Intact Male

**AGE**

3 Months

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Mobile Pet Imaging

**REFERRING VET**

Meaux

**INVOICE**

49508

**DATE**

1-12-22

**PRESENTING CLINICAL SIGNS**

Presented to specialist for further evaluation of a possible congenital portosystemic shunt. Appetite is historically picky to poor - owner syringe feeds him every 4 hours and Buddy will only nibble on dry food. Buddy has also had episodes of tremoring, but non recently. Finally, Buddy has had 3 episodes where he couldn't move his front legs- the most recent was 2 weeks ago. Currently, he feels well at home.

Abnormal PE/Chem/CBC/UA Results: Intermittent forelimb weakness. History of wobbling and diarrhea. BW shows panhypoproteinemia and elevated bile acids (post 90). CT for further evaluation of CPSS. Currently on metronidazole BID, lactulose BID, pet tinic, probiotics

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

Pre/post contrast studies provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

There is a single, extra-hepatic, portocaval shunt recognized originating from the left gastric vein, looping to the left and caudally to feed the caudal vena cava with an entrance of approximately 2,9 mm just cranial to the coeliac and cranial mesenteric artery. A regular portal intra-hepatic branching is not recognized. Liver size is reduced. Spleen and both kidneys are in expected limits. Gallbladder is inconspicuous without evidence of cholestasis.

As far as can be assessed, the stomach and all parts of intestine are regularly presented without any indication of foreign material, an obstructive or functional ileus.

Ureters, urinary bladder, trigonum and urethra are presented as expected. There is no evidence of cystic calculi.

Abdominal lymph nodes have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Single, extra-hepatic portocaval shunt (left gastric to cava)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT findings show an extra-hepatic shunt currently without secondary signs of portal hypertension. The diameter of the shunt entrance into the caudal vena cave is estimated and measures approximately 2.9 mm.



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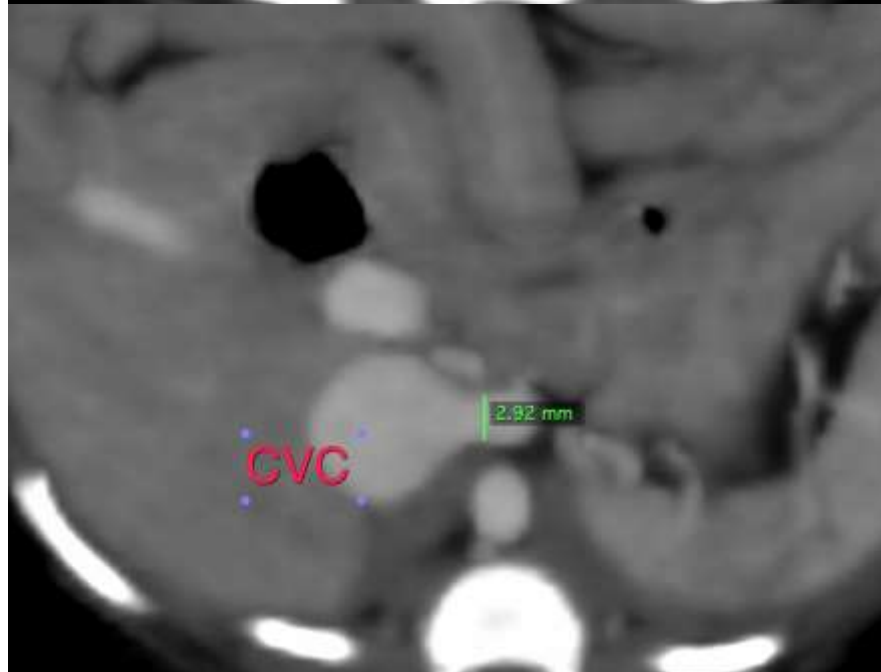
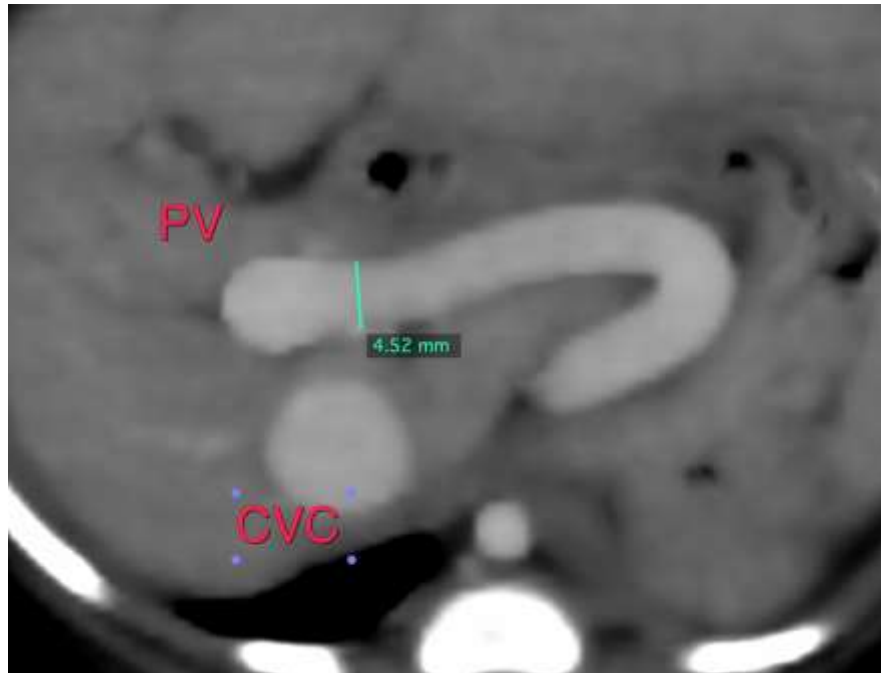
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging  
Sebastian.Jawinski@sonopath.com