



**PATIENT**

Ruby Chick

**PRESENTING CLINICAL SIGNS**

Chronic hx of pupd/inappropriate urination Ammonium bitrate crystalluria Small liver on ultrasound Enlarged kidneys ? portosystemic shunt Bile acids pending

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX & ABDOMEN**

Pre/post contrast studies provided for review.

**BREED**

Kelpie

**COMPUTED TOMOGRAPHIC FINDINGS**

Chest:

The lungs are regularly ventilated with close contact to the inner thoracic wall on all sides. There is no evidence of pleural thickening, fluid accumulation or free pleural gas. Pulmonary density is within normal limits, there is no evidence of focal or nodular pulmonary lesions.

**SEX**

Female

The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. The thoracic trachea and esophagus present as expected.

**AGE**

1

The heart is inconspicuous as far as can be assessed with CT.

The diaphragm appears normal.

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

Abdomen:

The liver appears small and presents a right-divisional, intrahepatic portocaval shunt with estimated diameters of 9.9 to 10.6 mm (entrance CVC). In addition to that distended tortuous small portocaval vessels are recognized in the right liver, entering the portal vein caudal to the right-divisional shunt.

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

Both kidneys appear rounded and enlarged with distended renal veins. The stomach is moderately filled indicating mild allotriophagia. The intestines subjectively show wall thickening but are inconspicuous apart from that. There are no signs of an obstructive or functional ileus.

**REFERRING VET**

Ella Richardson

The pancreas and spleen show normal findings in terms of size, surface, shape and contrast behavior.

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

**INVOICE**

52455

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

**DATE**

6-15-22

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Right-divisional, intrahepatic portocaval shunt with additional distended tortuous portal veins



**PATIENT** right liver  
Ruby Chick  
• Renomegaly  
• Microhepatia  
• Allotriophagia and signs of enteritis

**SPECIES**

Canine

**BREED**

Kelpie

**SEX**

Female

**AGE**

1

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

**REFERRING VET**

Ella Richardson

**INVOICE**

52455

**DATE**

6-15-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

In case of a coil-embolization the shunt entrance should be re-evaluated by selective portography. As far as can be assessed there is a single entrance to the CVC with a maximum diameter of 10.6 mm. The microhepatia, renomegaly and allotriophagia/enteritis are common concomitant findings.





**PATIENT**

Ruby Chick

**SPECIES**

Canine

**BREED**

Kelpie

**SEX**

Female

**AGE**

1

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

**REFERRING VET**

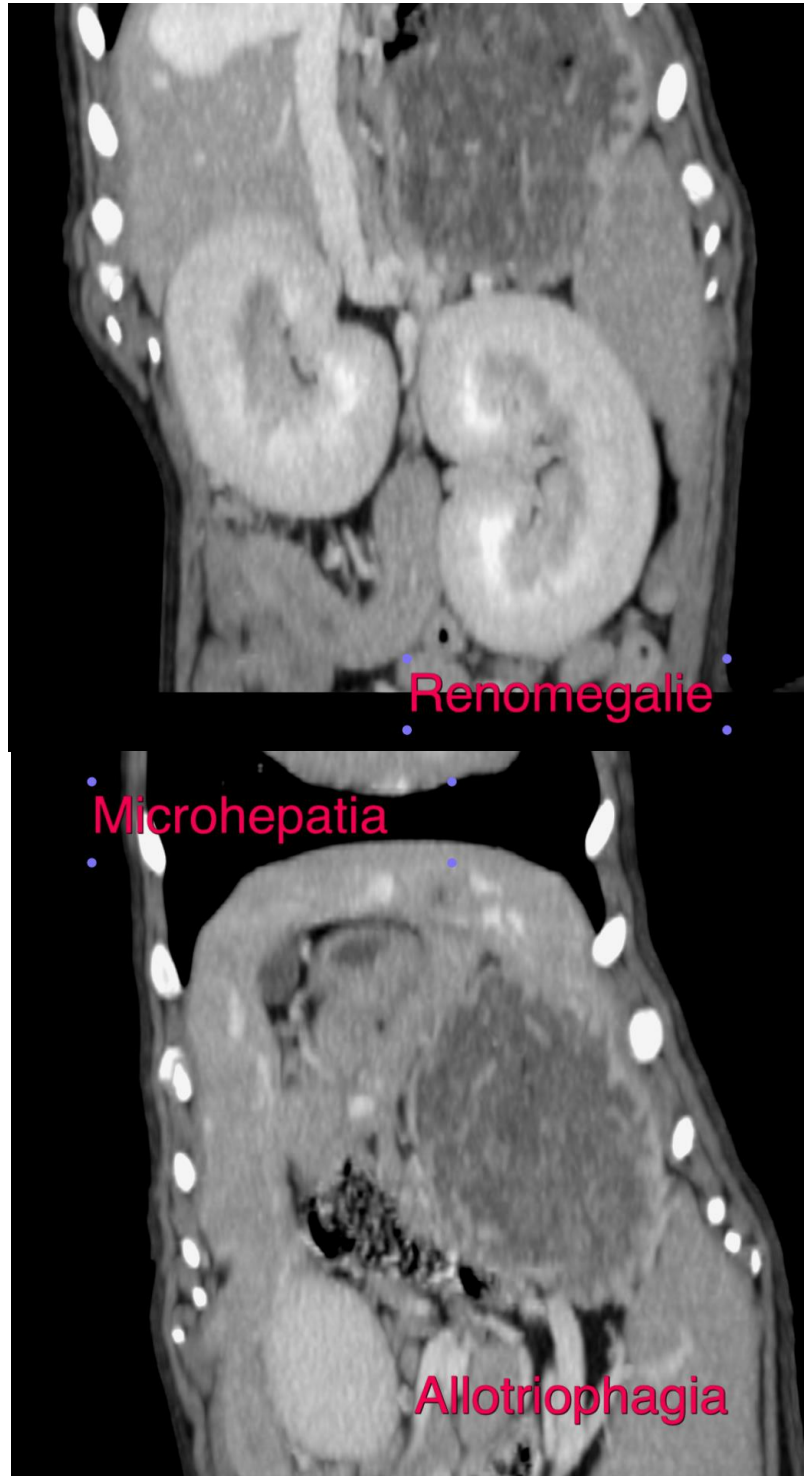
Ella Richardson

**INVOICE**

52455

**DATE**

6-15-22





**PATIENT**

Ruby Chick

**SPECIES**

Canine

**BREED**

Kelpie

**SEX**

Female

**AGE**

1

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

**REFERRING VET**

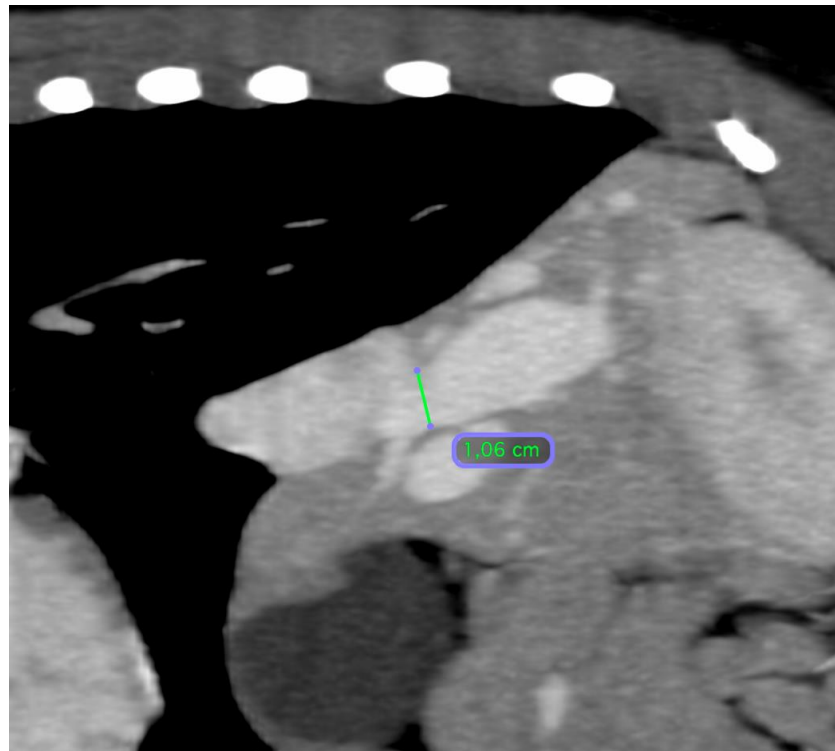
Ella Richardson

**INVOICE**

52455

**DATE**

6-15-22



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.

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