



**PATIENT PRESENTING CLINICAL SIGNS**

Bruno Kinsella History: bloody diarrhea for a day

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: cPL WNL, ALP, cholesterol- mildly elevated, mild basophilia, rest BW WNL, 3+ leukocytes in urinalysis + hematuria

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Radiographs of the thorax in three imaging planes are provided for review.

**BREED**

Spaniel Springer

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**SEX**

Male

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

**AGE**

17 Months

The liver is appropriate in position, size and presents uniform opacity.

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract. The prostate is normal in size.

The stomach is in its anticipated position and is empty.

**HOSPITAL NAME**

St. Catharine's AH

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

The colon is seen in the expected position and contains a small amount of gas and fecal material. The colon appears adynamic.

**REFERRING VET**

Dr. Jui Gokhale

**RADIOGRAPHIC DIAGNOSIS**

- Adynamic gas distended colon
- Empty stomach.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The overall empty gastrointestinal tract and gas distended adynamic appearing colon in combination with the presenting clinical signs are suggestive for (gastro)enteritis. There is no evidence of radiopaque foreign material nor distinct signs for gastrointestinal mechanical

**DATE**

1/14/23



**PATIENT**

Bruno Kinsella

obstruction. Rule out underlying dietary indiscretion, parasitic, parasitic infection, dysbacteriosis, other. If clinical signs are refractory to empirical therapy, recommend follow up radiographs or a complete abdominal ultrasound examination.

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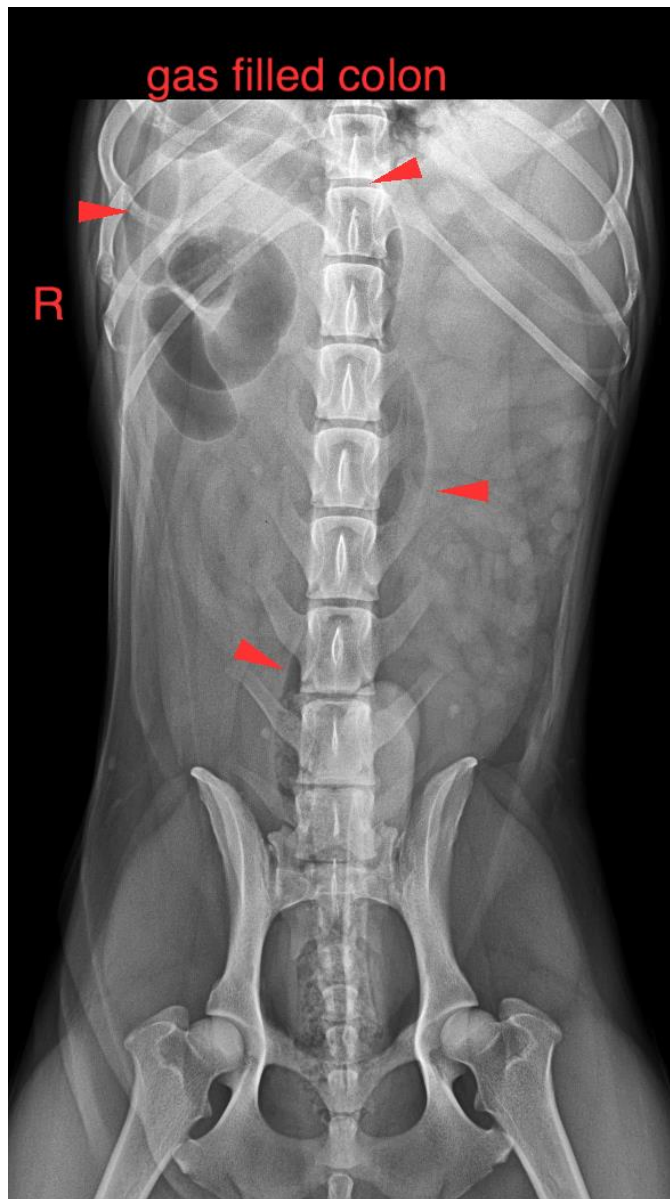
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**DATE**

1/14/23

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if



**PATIENT** I can be of any further assistance please contact me.

Bruno Kinsella

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

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