



PATIENT PRESENTING CLINICAL SIGNS

PATIENT May Sullivan
SPECIES Patient presents for intermittent history of vomiting over a period of 6 months. Initial blood work identifies inflammatory leukogram, thoracic and abdominal radiographs unremarkable. Treated supportively and symptoms improve for a couple of months. Recent blood work from today indicates anaemia (regen vs. pre-regn) with mild inflammatory leukogram, no biochemistry changes. Abdominal CT performed to exclude a cause of vomiting.

BREED Canine

COMPUTED TOMOGRAPHY OF THE ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

BREED Shepherd

COMPUTED TOMOGRAPHIC FINDINGS

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.

F

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

AGE

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

15 Years

The liver is normal in size and shape. Throughout the hepatic parenchyma, multiple well-defined, small (<4 mm), parenchymal filling defects are appreciated.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

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

In the mid abdomen, a dilated small intestinal loop is seen with segmental jejunojejunal intussusception over approximately 9 cm is seen.

HOSPITAL NAME

Colyton Veterinary Hospital

Spondylosis formation is seen multifocal along the lumbar spine. The lumbosacral intervertebral disc is protruding into the vertebral canal, obliterating approximately 85% of the cross-sectional area of the vertebral canal at the same level.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Dalton Nguyen

- Small intestinal segmental mechanical obstruction due to jejunojejunal intussusception
- Hepatic cysts
- Degenerative lumbosacral stenosis
- Spondylosis deformans

INVOICE

56195

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is segmental jejunal intussusception, potentially causing sub-ileus or there is dynamic intussusception as plausible cause for the described clinical signs. A lead point such as neoplasia, polyp, foreign body is not identified by CT. Surgical management is considered as the therapy of choice.

DATE

1-17-23



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SPECIES

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BREED

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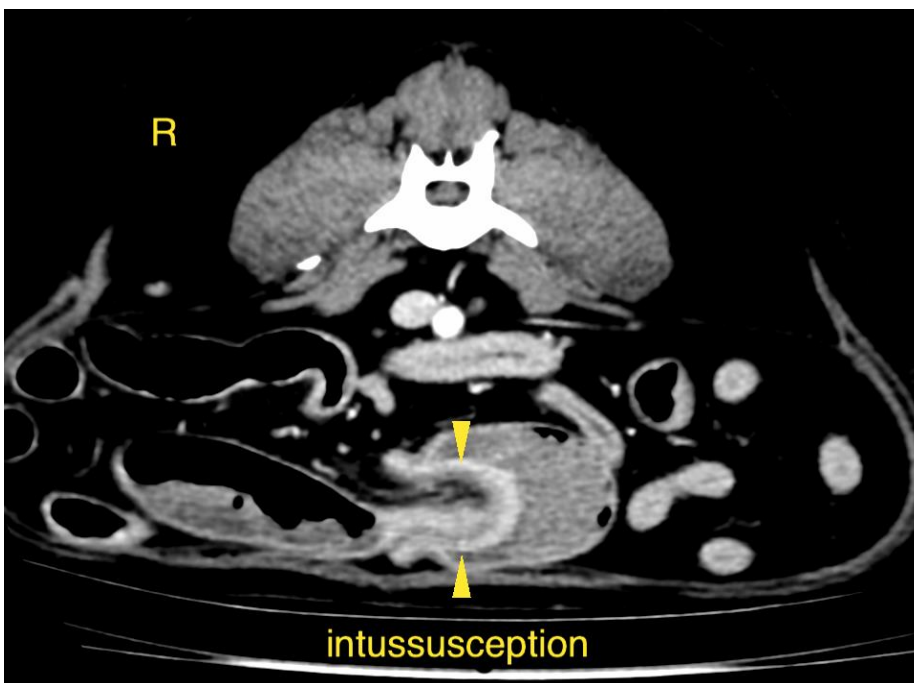
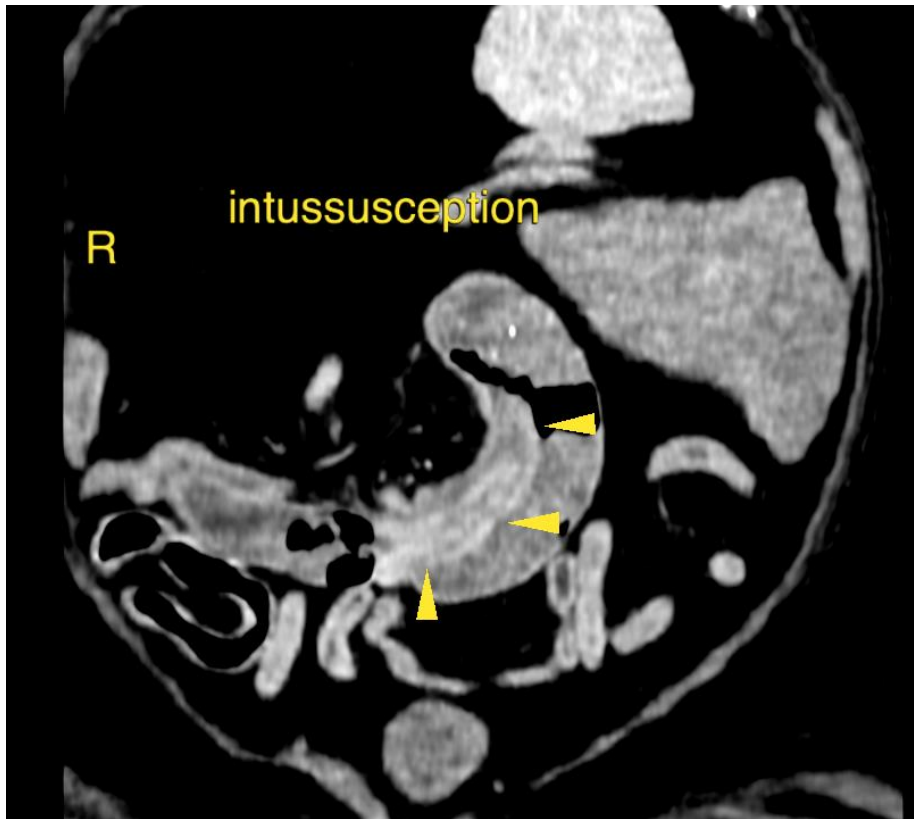
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

BREED

Shepherd

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

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