



PATIENT

Rue Whitton

PRESENTING CLINICAL SIGNS

Rue vomited this morning and lethargic all day, so Stacy withheld food all day. Stacy gave her some dinner tonight and she ate but after eating started trembled, flank watching. Not acting herself.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Abdominal tension, stage 1 dental disease, appears burpy/nauseous.

BREED

Australian Shepherd
Mix

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

The right rib of T13 is fused with the vertebral body.

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

AGE

2.5 Years

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

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 stomach is in its anticipated position and presents normal content.

HOSPITAL NAME

Elizabeth Animal
Hospital

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 presents with appropriate content.

REFERRING VET

Leon Anderson, DVM

RADIOGRAPHIC DIAGNOSIS

- Thoracolumbar transitional vertebra
- Otherwise normal abdomen

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the abdomen is negative for pathology. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. The material in the stomach is consistent with the previously ingested food. Recommend empirical management. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination; in some cases, a high ileus may lack classical radiographic signs of mechanical obstruction.

DATE

1-21-22



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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.

SEX

FS

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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