



PATIENT

Aspen Woodhouse

PRESENTING CLINICAL SIGNS

vomiting for 2 days
Abnormal PE/Chem/CBC/UA Results: Unremarkable

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

Siberian Husky

RADIOGRAPHIC FINDINGS

The body condition score is 8/9.

SEX

Female Spayed

The surrounding bony structures are within normal limits.

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

AGE

7 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.

HOSPITAL NAME

St. Catherine's Animal
Hospital

The stomach is in its anticipated position and presents normal content. The gastric rugal folds are mildly prominent.

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

Dr. Boctor

RADIOGRAPHIC DIAGNOSIS

- Possible mild thickening of the gastric wall/rugal folds
- Obesity

INVOICE

49818

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

1-25-22

The possible thickening of the gastric wall is suggestive for underlying gastritis. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. The material in the stomach is considered as 'normal' ingesta. Recommend empirical management of potential gastritis. 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 – considered unlikely here.



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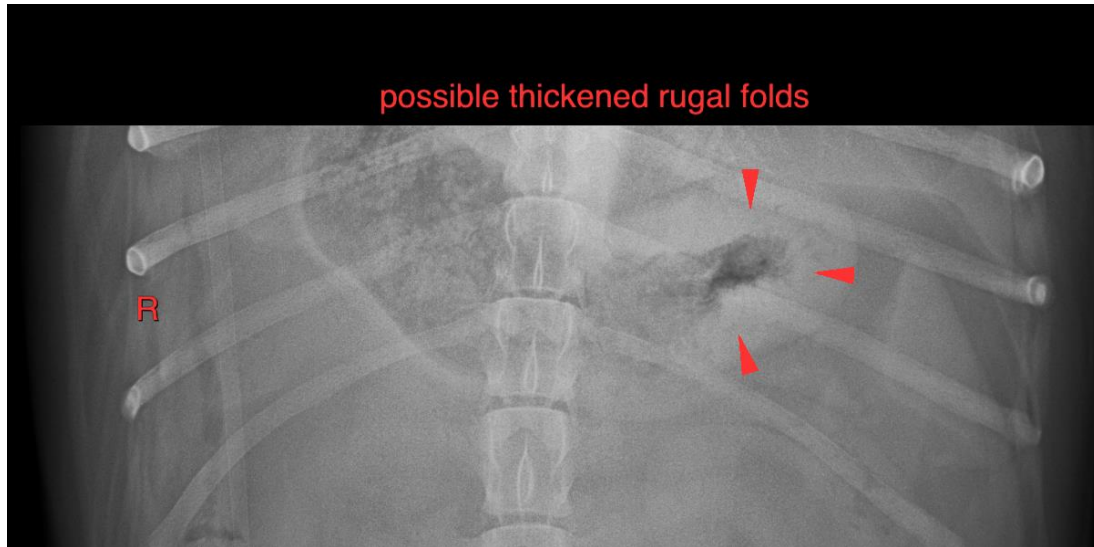
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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