



PATIENT

Teddy Cranmer

PRESENTING CLINICAL SIGNS

not eating for 3 days , vomiting , diarrhea
 Abnormal PE/Chem/CBC/UA Results: moderate abdominal distention and pain during palpation ,blood work including cpli unremarkable

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

Westipoo

RADIOGRAPHIC FINDINGS

Eight lumbar vertebra are appreciated, and a floating rib is seen bilateral to L1.

SEX

Male Neutered

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

AGE

3

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.

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated and contain foamy material.

The colon is seen in the expected position, is distended by gas and fluid and appears adynamic.

HOSPITAL NAME

Lakeshore Woods
 Animal Hospital

RADIOGRAPHIC DIAGNOSIS

- Foamy material throughout the gastrointestinal tract
- Adynamic appearing fluid and gas distended colon.

REFERRING VET

Dr. Sam Masoud

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pattern of the gastrointestinal tract in combination with the presenting clinical signs is highly suggestive for gastroenteritis. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. 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.

INVOICE

56430

DATE

1-28-23



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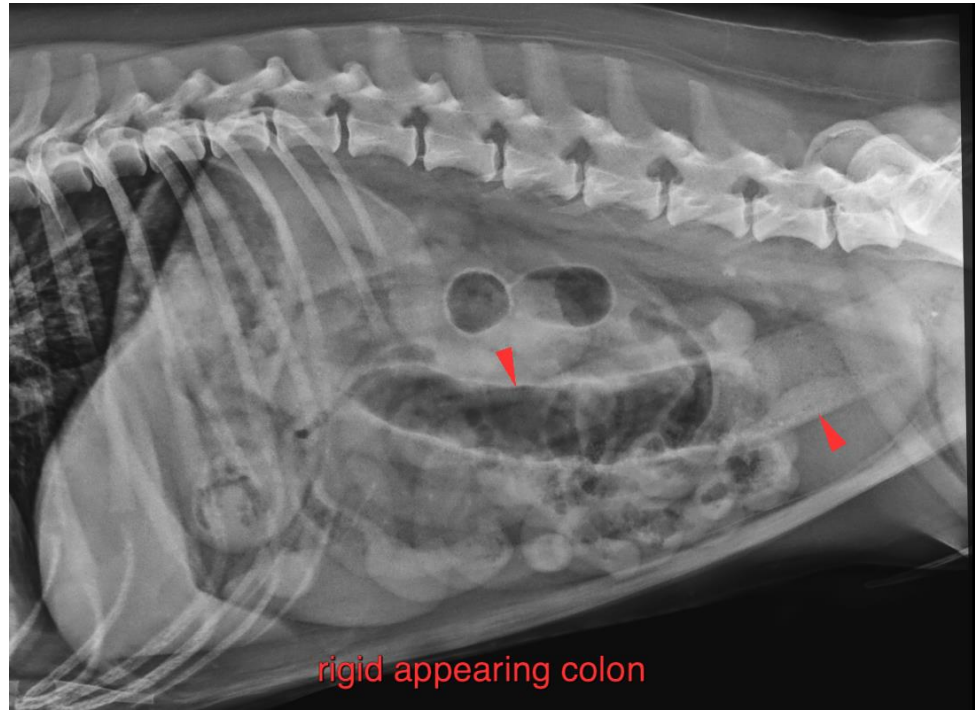
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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