



**PATIENT PRESENTING CLINICAL SIGNS**

Gooch Stubbs Reason for Visit: V/D History: diarrhea 1wk, bilious vomiting intermittent  
 Abnormal PE/Chem/CBC/UA Results: Hydration: Adequate Mentation: BAR EENT: OU clear.  
 AU clear, no debris. No cough on tracheal palpation. Oral cavity: No dental tartar. lost lower  
**SPECIES** canines, permanent incisors, permanent upper canines are starting to erupt Lymph Nodes:  
 Submandibular, prescapular and popliteal lymph nodes normal size, shape and consistency Skin:  
 Canine Healthy hair coat. No ectoparasites seen, skin clean dry and intact. CV/Respiratory: Normal heart  
 rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds.  
**BREED** Abd/GI: Soft, non-painful, no fluid wave, no palpable masses or organomegaly. Uro/Perineum: No  
 lesions or abnormalities. Musculoskeletal: BCS = 5/9. Ambulatory x 4, stiff gait, does not bend  
 stifles much, normal palpation all 4 limbs. Neurological: Alert and appropriate. No deficits noted.  
 French Bulldog Fecal: NPS on float and direct

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**Male RADIOGRAPHIC FINDINGS**

The patella bilaterally is superimposing with the femoral condyles.

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

5 Months, 4 Weeks

There is an age related generalized mild decreased serosal detail

**INTERPRETED BY**

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

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

The splenic head is in the anticipated position and within normal limits for size and opacity.

**HOSPITAL NAME**

The kidneys cannot be clearly defined. The urinary bladder is empty. No radiopaque calculi are noted throughout the upper and lower urinary tract.

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The stomach is in its anticipated position and is moderately distended by mild heterogeneous soft tissue and gas opaque material.

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.

**REFERRING VET**

The colon is empty.

Dr. Cepero

**RADIOGRAPHIC DIAGNOSIS**

**INVOICE**

- Suspect chymus in stomach
- Empty colon
- Suspect bilateral patellar luxation

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

The material in the stomach is most consistent with recent food intake. If the patient was fasted prior to the radiographs, foreign material within the stomach or gastric empty disorder are potentials. The intestinal tract presents without signs of mechanical obstruction or radiopaque foreign material. The empty colon is considered as a sequela to the history of diarrhea and the presumptive diagnosis is enteritis or gastroenteritis. If clinical signs are refractory to therapy,

1-3-23



**PATIENT**

Gooch Stubbs

recommend follow up radiographs of the fasted patient or a complete abdominal ultrasound examination.

**SPECIES**

Canine

**BREED**

French Bulldog

**SEX**

Male

**AGE**

5 Months, 4 Weeks

**INTERPRETED BY**

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Dr. med. vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

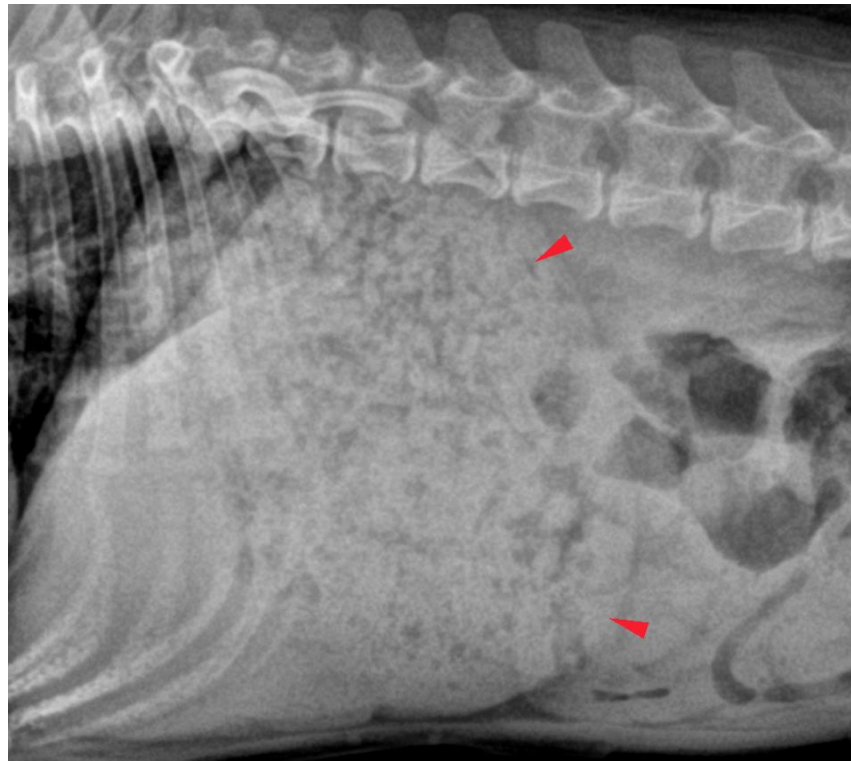
Dr. Cepero

**INVOICE**

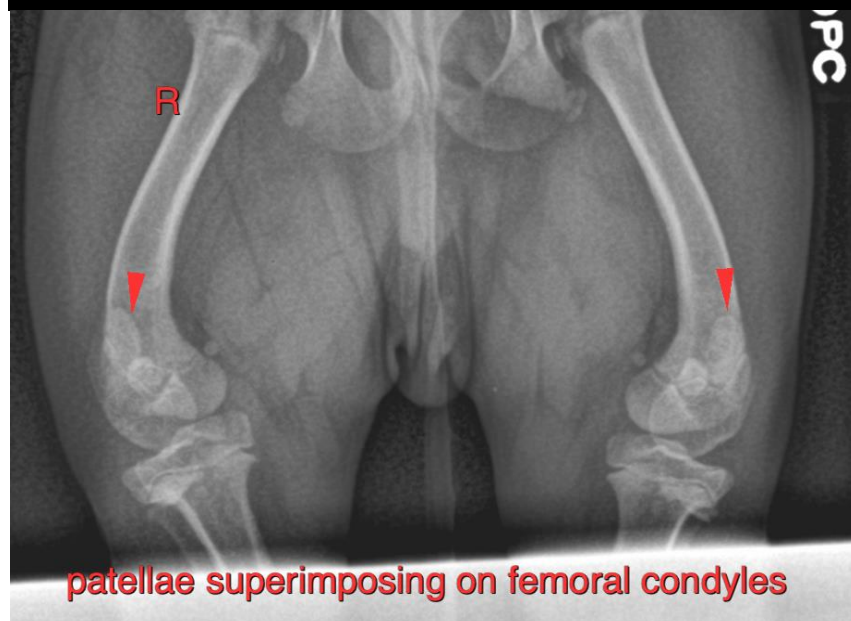
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**DATE**

1-3-23



suspect stomach distended by chymus



patellae superimposing on femoral condyles



**PATIENT**

Gooch Stubbs

**SPECIES**

Canine

**BREED**

French Bulldog

**SEX**

Male

**AGE**

5 Months, 4 Weeks

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Dr. Cepero

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**DATE**

1-3-23

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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