



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Kuno Thomas
SPECIES Canine
BREED Rottweiler Mix
SEX MN
AGE 7 Years

Patient was taken to RDVM on 10/1/22 for inappetence, lethargy and vomiting. The following was done during that visit: -Positive contrast cystogram performed after deflating Foley balloon. 5mL iohexol solution diluted to 10mL with NaCl flushed into bladder. No leaks in bladder identified -Called owner, recommended abdominal ultrasound to identify source of urine leakage. Owner consented. -Sedation for AUS: Fentanyl 1mL + Dexdomitor 0.2mL IV -Abdominal US: no rupture in bladder wall identified, no leak identified -Urethrogram with 5mL iohexol diluted to 10mL with NaCl: no leakage identified -Called owner and recommended transfer to surgeon for possible further diagnostics and abdominal exploratory. Owner agrees to transfer patient to Mountain West Veterinary Specialists.

Abnormal PE/Chem/CBC/UA Results: Results from RDVM on 10/1/22: -CBC: LYM 0.93, NEU 12.71, RBC 9.09, HGB 20.3, HCT 62.84 -CHEM: TBIL 0.7, BUN 73, CRE 3.5, PHOS 9.8, GLU 133, TP 8.3 -AFAST: 4/4 free fluid in abdomen, unable to visualize bladder -LAC: 4.0 - Abdominocentesis: serosanguinous fluid PCV/TP: 1% / 0g/dL LAC: 4.3mmol/L Cytology: red blood cells, no bacteria seen CHEM: BUN 140, CRE >20, K+ >8.5

COMPUTED TOMOGRAPHY OF THE ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

The abdominal serosal detail is moderately decreased and a mild amount of gravity dependent, fluid attenuating material is appreciated in the ventral aspect of the peritoneal cavity. The peritoneal fat presents mild fat-stranding. An abdominal catheter is appreciated in the right cranial abdomen.

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. The ureters present with the expected course and no leakage of contrast media from the ureters is appreciated. A urinary catheter is appreciated. In the delayed post contrast phase, leakage of contrast media from the urinary bladder into the peritoneal cavity is appreciated – suspect from the left cranioventral aspect of the urinary bladder.

The pictured parts of the spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The vertebral endplates of the lumbosacral junction present mild to moderate spondylosis formation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- History of uroabdomen
- Defect left cranioventral urinary bladder wall

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study presents a defect of the urinary bladder wall with leakage of contrast media from the urinary bladder – the defect appears to be present in the left cranioventral aspect of the urinary bladder. Surgical management of the defect is considered as the therapy of choice.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME

Mountain West
 Veterinary Hospital

REFERRING VET

Jeff Simmons

INVOICE

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DATE

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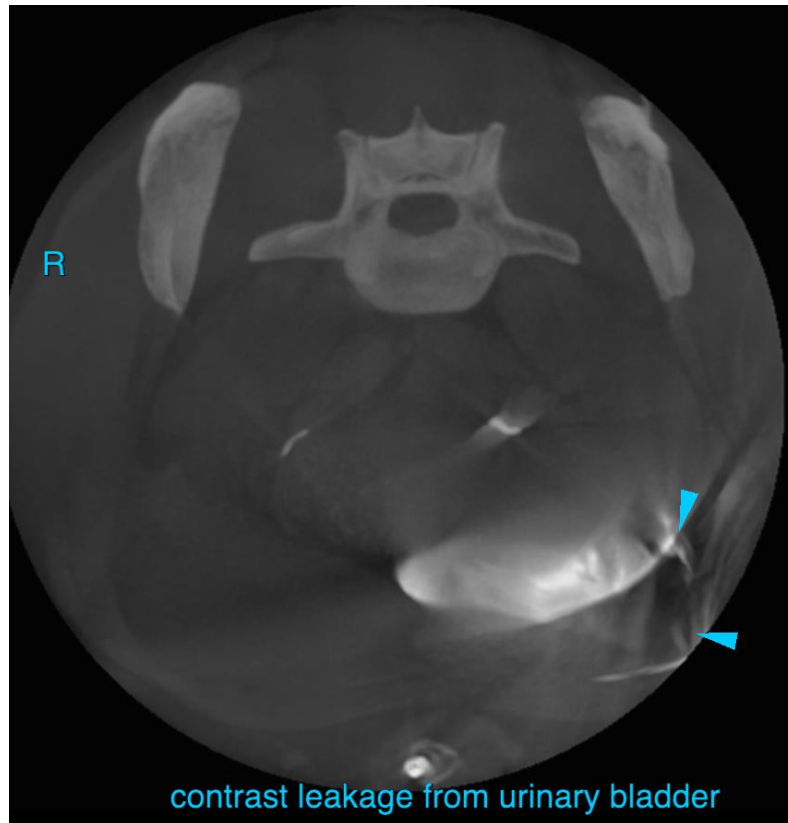
Jeff Simmons

INVOICE

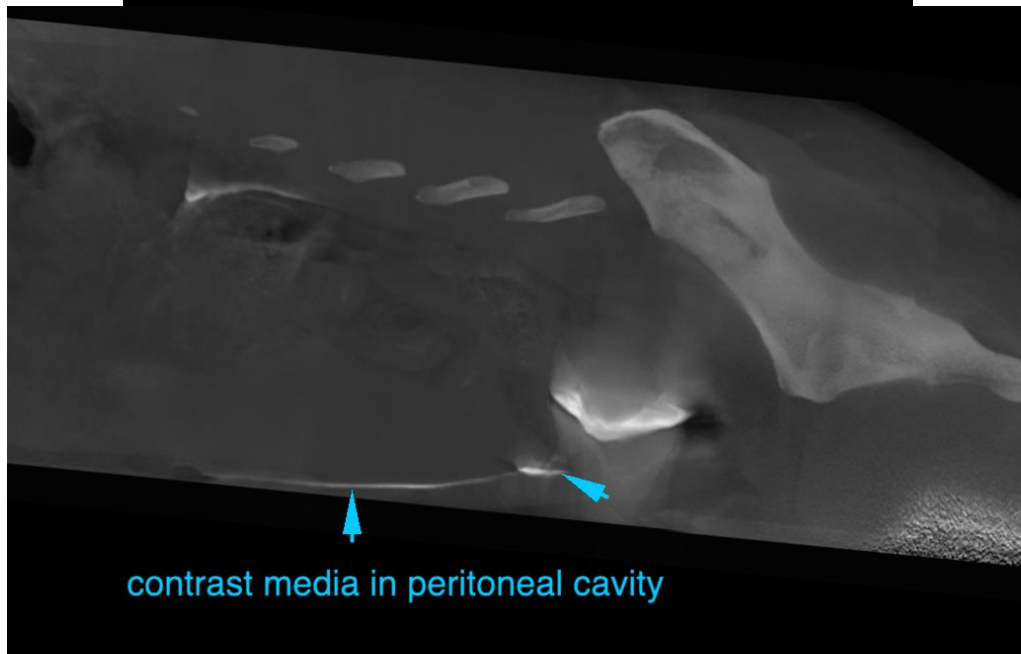
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contrast leakage from urinary bladder



contrast media in peritoneal cavity



PATIENT

Kuno Thomas

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.

SPECIES

Canine

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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