



PATIENT PRESENTING CLINICAL SIGNS

Riley Marquardt History: not eating
Abnormal PE/Chem/CBC/UA Results:

SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN

Canine A right lateral radiograph of the abdomen is provided for review.

RADIOGRAPHIC FINDINGS

BREED

Tibetan Terrier The surrounding bony structures are within normal limits.

A moderate to marked amount of subcutaneous fat is seen dorsal to the gluteal region.

SEX

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

Neutered Male

The hepatic volume is mild to moderately increased and the caudoventral hepatic margins are rounded; the gastric axis is deviated caudally. The hepatic parenchyma is uniform soft tissue attenuating.

AGE

11 Years The splenic body and tail are considered normal for position, size, shape and opacity – no evidence of rounded splenic margins.

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

New Bridge VP

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. Abina Glennon

RADIOGRAPHIC DIAGNOSIS

- Hepatomegaly

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy, hepatitis or neoplastic infiltration. Ultrasound including FNA sampling can be used as minimally advanced diagnostic tests.

DATE

10/5/21



PATIENT

Riley Marquardt

SPECIES

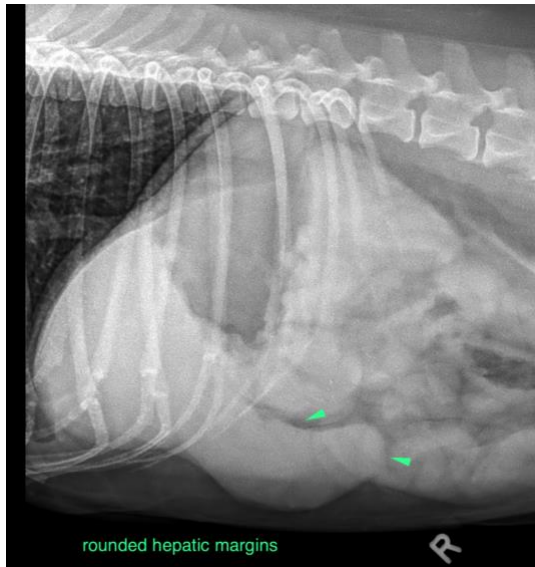
Canine

BREED

Tibetan Terrier

SEX

Neutered Male



AGE

11 Years

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

INTERPRETED BY

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,
DVM Dr. med. vet.
DipECVDI

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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