



**PATIENT PRESENTING CLINICAL SIGNS**

**Porter Deweese** History: Patient presented for intermittent vomiting for the last week. Pet has a history of eating things he shouldn't. Decrease in appetite started this morning, painful on abdominal palpation

**SPECIES** Abnormal PE/Chem/CBC/UA Results:

**Canine RADIOGRAPHIC STUDY OF THE ABDOMEN**

A complete set of radiographs of abdomen is provided for review.

**BREED RADIOGRAPHIC FINDINGS**

**Shar Pei Mix** The surrounding bony structures are within normal limits.

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

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

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

**3 Years** 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** 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.

**Sebastian Schaub, DVM Dr. med. vet. DipECVDI** The stomach is in its anticipated position and is empty.

**HOSPITAL NAME** 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.

**Boca Park AH** The colon is seen in the expected position and is empty but a mild amount of gas. In the VD view, the descending colon presents focal mild narrowing of the lumen by soft tissue material associated with the colonic wall.

**REFERRING VET**

**Dr. Corinna Gorgon RADIOGRAPHIC DIAGNOSIS**

- Possible segmental mural thickening segmental colon

**INVOICE**

**13672 INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The empty colon is a sequela to the hyporexia.

**DATE**

10/9/21



**PATIENT**

Porter Deweese

The segmental narrowing of the descending colon with possible thickening of the wall represents likely a less distended/contracted colonic segment or a segment containing unformed fecal material attached to the wall. However, mural thickening is a consideration as well (e.g. colitis or neoplastic infiltration). In case of doubt either a positive contrast barium enema or ultrasound can be used to rule in/out a mural colonic lesion completely.

**SPECIES**

Canine

There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. If not done so yet, complementing workup by complete blood work include cpl is considered beneficial as well.

**BREED**

Shar Pei Mix

**SEX**

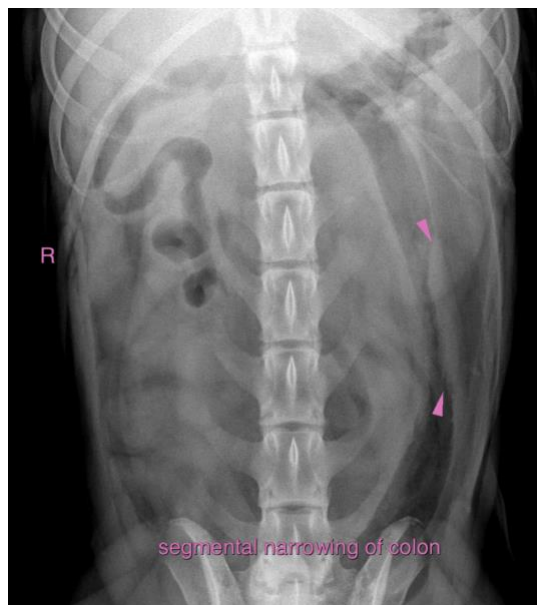
Neutered Male

**AGE**

3 Years

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI



**HOSPITAL NAME**

Boca Park AH

**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.**

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.

**REFERRING VET**

Dr. Corinna Gorgon

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

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**PATIENT**

Porter Deweese

**SPECIES**

Canine

**BREED**

Shar Pei Mix

**SEX**

Neutered Male

**AGE**

3 Years

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**HOSPITAL NAME**

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