



PATIENT

Sam Reynolds

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered

AGE

6Y, 10M

WEIGHT

28.6

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Carissa Hayden

HOSPITAL NAME

Elizabeth Animal
Hospital

REFERRING VET

Leon Anderson, DVM

INVOICE

72733

DATE

11-24-25

PRESENTING CLINICAL SIGNS

Yesterday morning, he threw up around 7am. - It's not uncommon for him because he will throw up once in a while. -He then vomited a few more times yesterday. -He started to have really bad diarrhea. -Last night he didn't want to eat his food at all. -This morning ate some boiled chicken and rice and kept that down but is having diarrhea still.

Abnormal PE/Chem/CBC/UA Results: PE: Mucus Membranes: Tachy Hydration: 7% dehydrated
CBC Hematocrit 63.2% Hemoglobin 20.8g/dL MCV 77.8 fL Lymphocytes 0.95K/uL CHEM Chloride 108mmol/L

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

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

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

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.

The stomach is in its anticipated position and mildly distended by gas, accentuating the gastric rugal folds.

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 contains a small amount of gas and fecal material.

RADIOGRAPHIC DIAGNOSIS

- Overall empty gastrointestinal tract

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The empty gastrointestinal tract in combination with the presenting clinical signs is suggestive for gastroenteritis. There is no evidence of radiopaque foreign material, abnormal gas pattern or signs for gastrointestinal mechanical obstruction. Rule out dysbacteriosis, parasitic infection, dietary indiscretion, other. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination.



PATIENT

Sam Reynolds

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered

AGE

6Y, 10M

WEIGHT

28.6

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Carissa Hayden

HOSPITAL NAME

Elizabeth Animal
Hospital

REFERRING VET

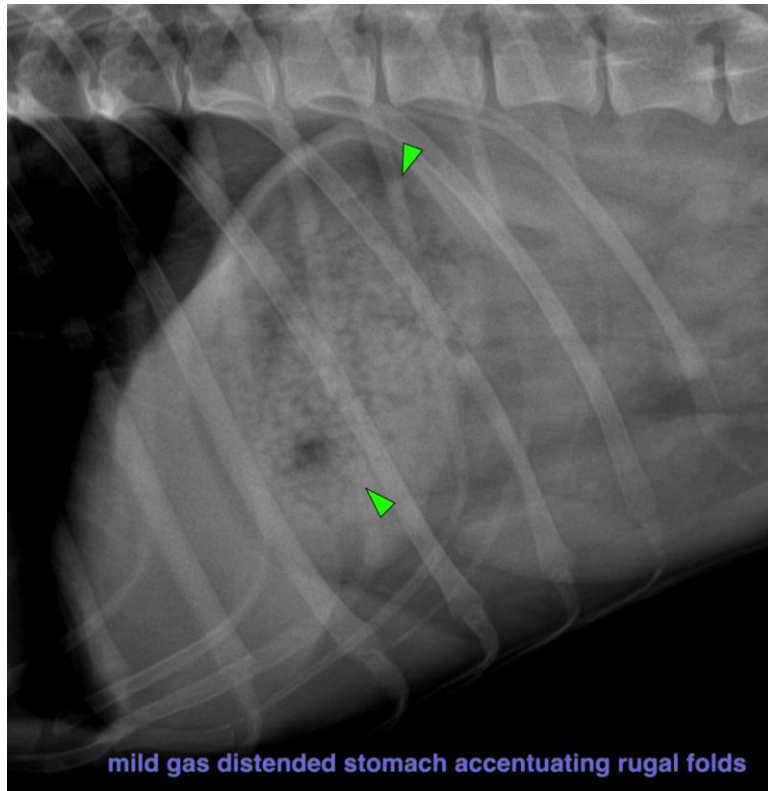
Leon Anderson, DVM

INVOICE

72733

DATE

11-24-25



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
info@sonopath.com