



PATIENT PRESENTING CLINICAL SIGNS

Cash Barley P presented as a transfer for severe hypoglycemia. O notes that yesterday p collapsed and was twitching at home. General BW unremarkable other than severe hypoglycemia. P has been on Dextrose 10% drip overnight and BGs vary (extreme highs to extreme lows). Primary DDX is insulinoma. No known toxin per o. Full body CT scan submitted for evaluation.
 Abnormal PE/Chem/CBC/UA Results: Low BGs, low ALP at rDVM, transferred to us last night and BG on presentation was 33mg/dL

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

BREED

A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.

Australian Shepherd Mix

COMPUTED TOMOGRAPHIC FINDINGS

Skull

SEX

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

Male

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

AGE

8 Years

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

HOSPITAL NAME

Animal Emergency Hospital Volusia

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Mild fat stranding is seen along the right external jugular vein – suspect preceding venipuncture.

Thorax

REFERRING VET

Dr. Carver

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

INVOICE

54953

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

DATE

11-3-22

The lung parenchyma presents the expected architecture and attenuation behavior.



PATIENT

Cash Barley

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

Abdomen

SPECIES

Canine

The cranial abdomen presents with moderate motion artefacts.

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

BREED

Australian Shepherd
Mix

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 adrenal glands are within normal limits for size, shape and organ architecture.

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

SEX

Male

Evaluation of the pancreas and liver is limited, due to motion artefacts.

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

AGE

8 Years

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INTERPRETED BY

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Dr. med. vet. DipECVDI

- Normal thorax
- Normal skull
- Normal abdomen- moderate motion artefacts of the cranial abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Unfortunately, there are moderate motion artefacts of the cranial abdomen and evaluation of major parts of the pancreas is not possible. The visible caudal segment of the duodenal lobe of the pancreas presents without abnormalities. If clinical signs and laboratory changes are suggestive for insulinoma, diagnostic celiotomy with thorough palpation of the pancreas or repeating the CT scan of the abdomen using a breath hold technique during the scan of the cranial abdomen is recommended.

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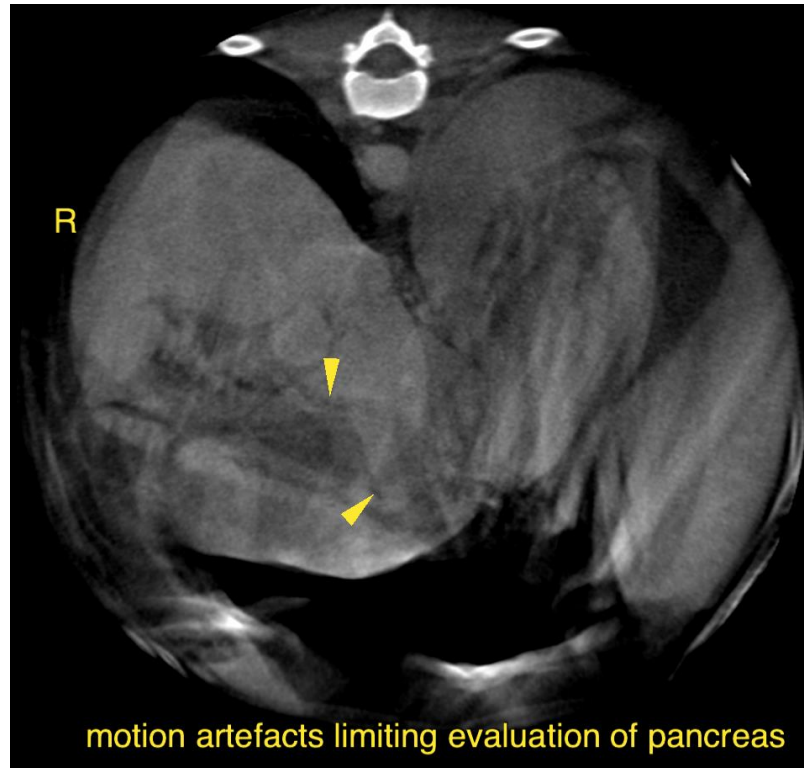
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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