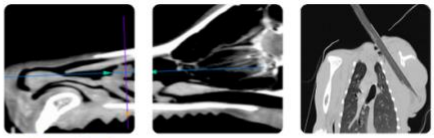

PATIENT

Luna Vincent

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

6 Years 5 Months

WEIGHT

23.4 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Lisa S.

HOSPITAL NAME

ASC Oceanside

REFERRING VET

Dr. Short

INVOICE

35773

DATE

12/5/25

PRESENTING CLINICAL SIGNS

History: Abdominal distention
Abnormal PE/Chem/CBC/UA Results: 12/5/25 CBC/CHEM- WNL

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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.

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

Abdomen

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

The left kidney is within normal limits for size, shape and organ architecture.

The right kidney is significantly enlarged, extending from the caudal aspect of the right division of the liver into the caudal abdomen, up to the level of L6. Complete loss of the parenchyma of the right kidney is appreciated, that is replaced by fluid attenuating material, demarcated by a thin contrast enhancing capsule. The right ureter is dilated and can be appreciated along the dorsal aspect of the enlarged right kidney; measuring up to 2.6 cm in diameter. Level with the cranial pole of the urinary bladder the dilated right ureter presents an abrupt stop. The structures of the intestinal tract are displaced laterall and ventrally by the mass effect of the enlarged right kidney.

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

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

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

The bony and surrounding soft tissue structures reveal no abnormalities.

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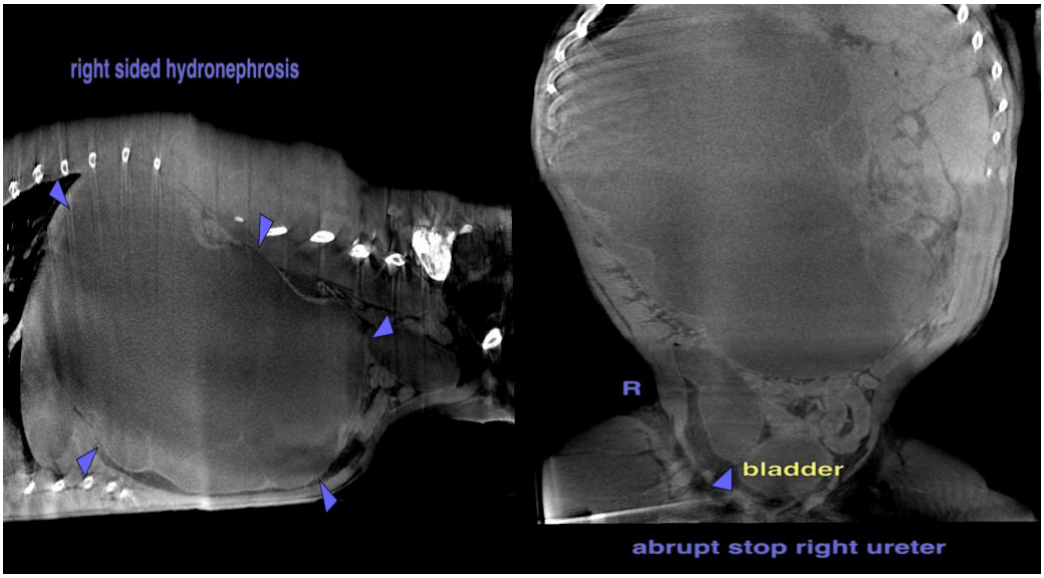
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Hydronephrosis right kidney and right sided hydroureter with an abrupt stop level with the urinary bladder
- Normal thorax

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals hydronephrosis of the right kidney with secondary marked enlargement of the right kidney – ureteral stenosis or inadvertent ligation during spaying is a likely underlying cause. Surgical management to remove the right kidney and dilated ureter is advised.



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, DVM, Dr. med. vet. DipECVDI
info@sonopath.com