



PATIENT PRESENTING CLINICAL SIGNS

Kali Gregory History: Historically show persistently elevated liver values and mild elevation in bile acids. Primary hepatopathy or microhepatica vs liver shunt/microvascular dysplasia as cause of the liver abnormalities and potentially connected to the circling

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

French Bulldog

COMPUTED TOMOGRAPHIC FINDINGS

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

SEX

Female

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.

AGE

1

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

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
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The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

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

HOSPITAL NAME

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Mild central mineralization of the intervertebral disc L6/L7 is appreciated.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- No evidence of portosystemic shunting, neither intra- nor extrahepatic

REFERRING VET

Dr. Rory Applegate

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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No macroscopic vascular bypass of the liver was noted in the pre- and post-contrast studies of the abdomen. However, if the clinical signs are consistent with insufficiency of the liver, primary non-cirrhotic portal hypertension (microvascular dysplasia) or other diffuse parenchymal liver disease would still be a potential and should be ruled out by means of ultrasound guided or surgical liver biopsy.

DATE

2/17/23



PATIENT

Kali Gregory

SPECIES

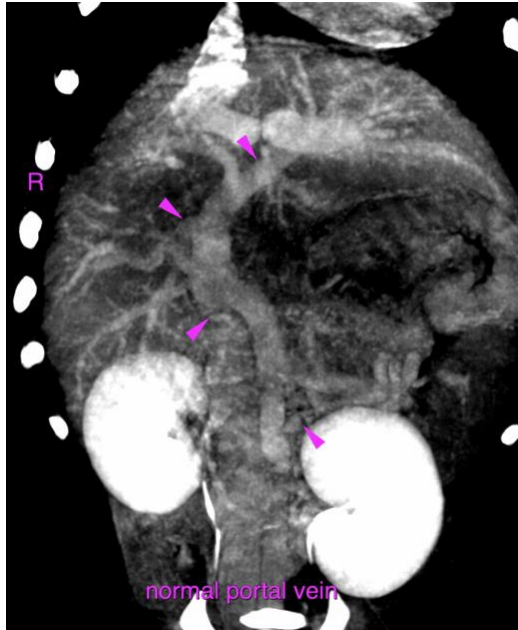
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,
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