



## PATIENT

Slim Vavasis

## SPECIES

Canine

## BREED

Pitbull Mix

## SEX

MN

## AGE

13Y

## WEIGHT

62lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Ryan Bergner

## HOSPITAL NAME

Waterville Veterinary  
Clinic

## REFERRING VET

James Gilchrist

## INVOICE

73553

## DATE

2-2-26

## PRESENTING CLINICAL SIGNS

### History:

- Slim, a 14-year-old male neutered (with zeuterin < 2yrs old) canine, presents for follow-up on chronic gastrointestinal issues. The owner reports that Slim has an intermittent appetite and vomits bile approximately one to two times per week. The last episode of vomiting undigested food was a earlier this morning. There has been no diarrhea for several weeks. Slim has a significant medical history, including a diagnosis of hypothyroidism approximately four years ago. In January 2024, he underwent surgery at a specialty hospital for the removal of two malignant parathyroid tumors after being diagnosed with hypercalcemia. A cervical mass was discovered in May 2024 and was determined to be a MCT - O decided to not put P through another surgery. His left testicle is slightly smaller and more firm than the R testicle.

Abnormal PE/Chem/CBC/UA Results: Today's labwork showed a very mild microcytic, hypochromic, non-regenerative anemia. Chemistry was all normal. Recent Texas GI panel showed a mild cPLI elevation.

## RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

A complete set of radiographs of the thorax and abdomen are provided for review.

## RADIOGRAPHIC FINDINGS

### Thorax

Along the thoracic & lumbar spine, multifocal spondylosis formation is seen.

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape; there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and opacity with randomly distributed interspersed punctuate mineralization; the intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

### Abdomen

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 hepatic volume is increased, the caudoventral hepatic margins are rounded. The hepatic parenchyma has a homogeneous soft tissue opacity.



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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, delineation and opacity. The left kidney has mild irregular margins. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract. The prostate is occupying approximately 40% of the height of the cranial aperture of the pelvic canal (normal <70%).

The stomach is in its anticipated position and presents normal content.

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 presents with appropriate content.

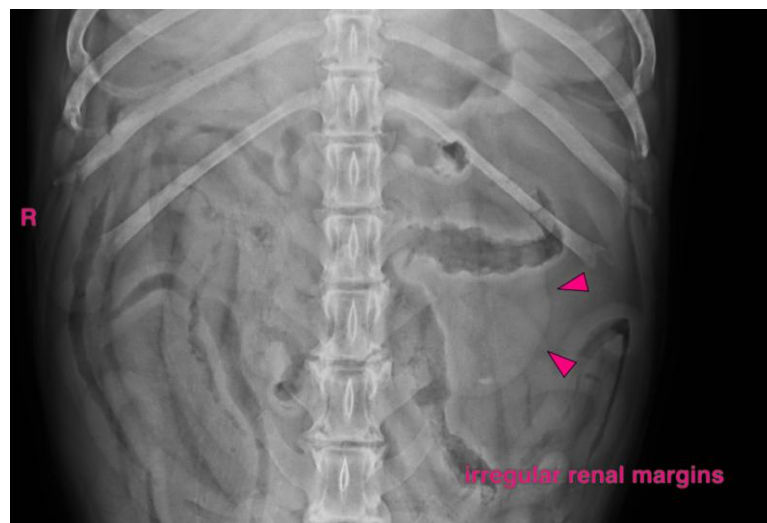
## RADIOGRAPHIC DIAGNOSIS

- Mild hepatomegaly
- Mild irregular margins left kidney
- Spondylosis deformans
- Pulmonary osteomas

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy ± hepatitis or less likely diffuse neoplastic infiltration. Ultrasound can be used for specification and will allow FNA sampling as advanced minimally invasive diagnostic tool.

The irregular margins of the left kidney are suggestive for chronic renal disease ± renal infarction or renal cyst.





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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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)