



PATIENT PRESENTING CLINICAL SIGNS

Gunner Pym-Stone The owner stated the dog had started the last night. Vomited times till 11 am when the owner brought him to the hospital. No any diarrhea present. Still drinks water, and the owner didn't give any food since the last evening.

SPECIES Abnormal PE/Chem/CBC/UA Results: Hemoglobin 190 (110 - 190) HIGH NORMAL; Ca 3.10 (2.25 - 3.10) HIGH NORMAL; TP 76 (55 - 76) HIGH NORMAL; ALB 44 (25 - 40) HIGH; ALP 379 (0 - 140) HIGH; CI 98 (102 - 120) LOW; URINALYSIS: The sample of urine was collected by catheterization; USG - 1.035; pH-8.0; WBC - 3/HPF; RBC - 2/HPF; nsEPI - 3-5/HPF; cPL Test: LIP 137.3 U/L (0.0 - 125.0) HIGH;

Canine

BREED RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

SEX The vertebral endplates L2/L3 present mild spondylosis formation.

Male Neuter 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.

AGE The liver is appropriate in position, size and presents uniform opacity.

9 Years 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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

St. Catherine's Animal
Hospital

The stomach is in its anticipated position and is empty.

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 fecal material.

REFERRING VET

Dr. Dragan Gunj

RADIOGRAPHIC DIAGNOSIS

- Empty gastrointestinal tract
- Spondylosis deformans

INVOICE

57241

DATE

3-14-23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study presents without abnormalities, explaining the recent onset of vomiting. The overall empty gastrointestinal tract is considered as s sequela to the vomiting and fasting of the patient. The presumptive diagnosis can be gastritis/gastroenteritis or pancreatitis There is no evidence of radiopaque foreign material, abnormal gas pattern or signs for gastrointestinal mechanical obstruction. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination; in some cases a high ileus may lack classical radiographic signs of mechanical obstruction.



PATIENT

Gunner Pym-Stone

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.

SPECIES

Canine

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.

BREED

Border Collie Mix

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com

SEX

Male Neuter

AGE

9 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

St. Catherine's Animal
Hospital

REFERRING VET

Dr. Dragan Gunj

INVOICE

57241

DATE

3-14-23