



**PATIENT PRESENTING CLINICAL SIGNS**

Precious Osceola Reason for Visit: blood in urine History: pet is here for blood in urine noted yesterday, owner states noted pet drinking more 1 day prior- Pet is intact and LHC was about 2-3 months ago- Owner states pet is still bright alert and happy.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no debris AU; No cough on tracheal palpation. Oral Cavity: mild dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Canine Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. **BREED** Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Schnauzer Uro/Perineum: N Musculoskeletal: Ambulatory x4, no lameness noted. No pain on palpation of limbs. BCS 5/9 Neurological: Appropriate UA - SG 1.017, inc RBC, WBC, no bacteria rads - uroliths

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

**SEX** Radiographs of the abdomen in two imaging planes are provided for review.

Female **RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**AGE** No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

5 Years The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

**INTERPRETED BY** In the lateral projection the hepatic volume is mildly decreased and the gastric axis is oriented cranially.

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, shape, delineation and opacity. The urinary bladder is in its anticipated position. Three well-defined, irregular rounded mineral opaque calculi, measuring up to 14 mm in size are superimposed on the urinary bladder..

**HOSPITAL NAME**

DPC Veterinary Hospital 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.

**REFERRING VET**

Dr. White The colon is seen in the expected position and presents with appropriate content.

**RADIOGRAPHIC DIAGNOSIS**

- Cystolithiasis
- Subjective mild microhepatica

**INVOICE**

57487

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

The history of hematuria is likely a sequela to the cystolithiasis as trigger for cystitis. Based on the results of the urinalysis, surgical management might be considered to remove the cystoliths.

3-28-23

The microhepatica can be a subjective impression due to the thoracic conformation, especially as there are no laboratory changes indicating hepatic dysfunction (e.g. secondary to chronic hepatitis, portosystemic shunting).



**PATIENT**

Precious Osceola

**SPECIES**

Canine

**BREED**

Schnauzer

**SEX**

Female

**AGE**

5 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

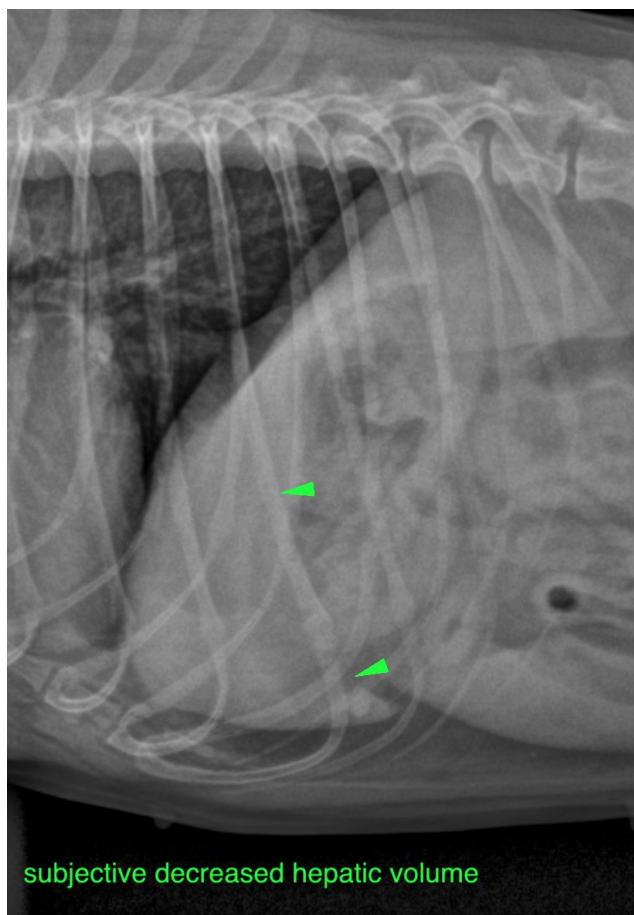
Dr. White

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**PATIENT**

Precious Osceola

**SPECIES**

Canine

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.

**BREED**

Schnauzer

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.

**SEX**

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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Female

**AGE**

5 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

Dr. White

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