



PATIENT

TJ Van Winkle

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

11 Years 6 Months

WEIGHT

88.5

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Mandy, LVT

HOSPITAL NAME

Gentle Doctor AH

REFERRING VET

Dr. Rotthaus

INVOICE

36091

DATE

3/3/26

PRESENTING CLINICAL SIGNS

Patient has a 2 month history of panting and pacing more. His abdomen is tense on exam. He is also urinating inside the house but this has been going on for several years. Normal urinalysis, cbc, chemistry and thyroid (T4 = 1 - low normal). Pain on extension of both knees. Started treatment for arthritis with gabapentin.

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

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

The serosal detail is decreased and the peritoneal fat accentuated in the ventral abdomen presents moderate soft tissue striation.

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

The splenic head is in the anticipated position and within normal limits for size and opacity. In the caudoventral abdomen, superimposed on the cranial part of the urinary bladder, a roundish, well-defined, soft tissue opaque mass is seen, measuring approximately up to 15 cm – causing cranial and lateral displacement of the intestinal loops in the VD view.

The right kidney is seen and presents 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.

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

- Caudoventral abdominal soft tissue mass
- Peritoneal effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The abdominal mass is highly suggestive to originate from the caudal extremity of the spleen due to primary splenic neoplasia and abdominal hemorrhage – other potentials include mesentery, lymph node, intestine, (urinary bladder) – neoplasia, granuloma, hematoma, cyst.

An abdominal ultrasound examination or CT study of the abdomen can be performed for confirmation and specification for possible surgical planning.



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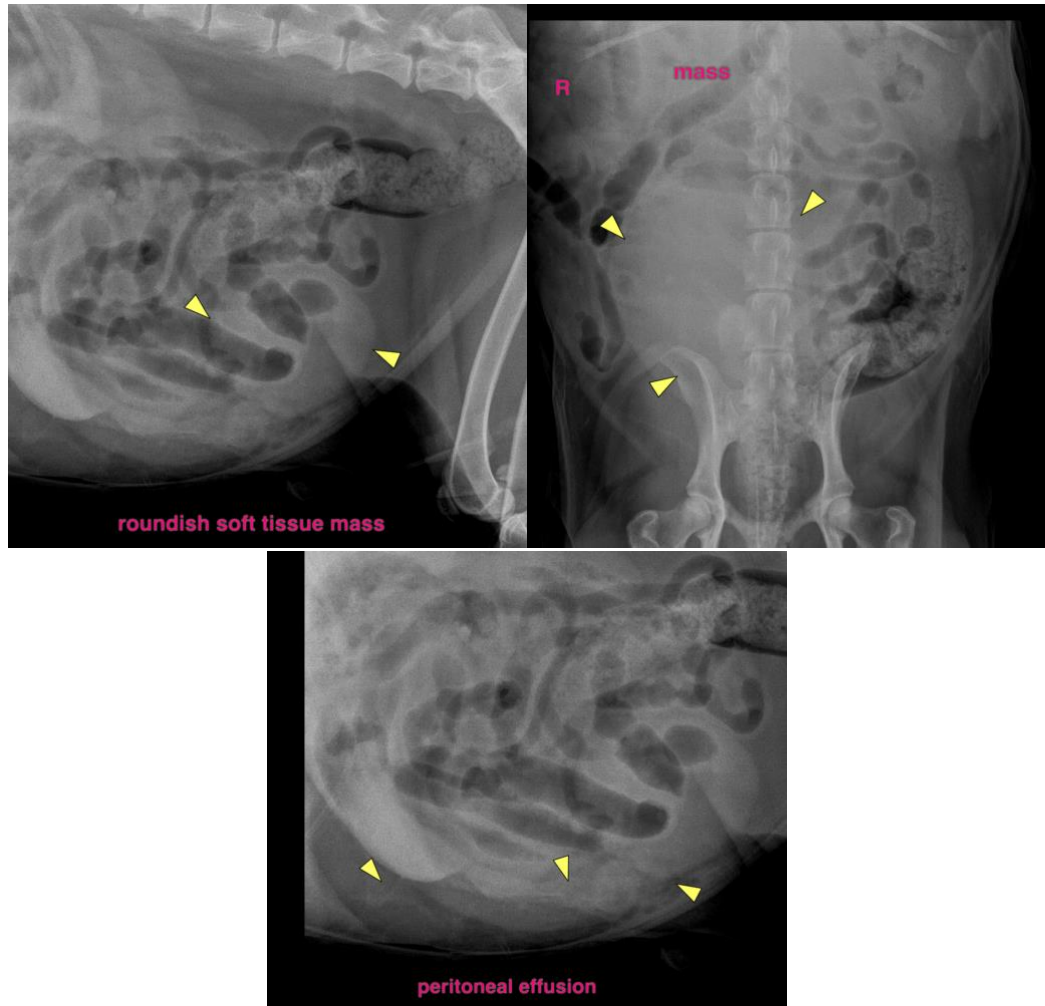
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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