



PATIENT

Brody Caranci

PRESENTING CLINICAL SIGNS

History: Presented to referring veterinarian Mar 25 for annual vaccines- noted lethargy and hyporexia at home. BW showed moderate non-regenerative anemia (hct 0.28), hypoalbuminemia, elevated creatinine, hyperkalemia, hypocholesterolemia. Significant dilation of upper GIT on abdo rads w /thickened bowel loops. Referral for adv imaging. Mildly thickened intestinal wall seen on ultrasound.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

BREED

Saint Bernard

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Thorax

Neutered Male

Multifocal mild spondylosis formation is seen along the thoracic spine.

AGE

9 Years

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior with interspersed punctuate mineralization.

HOSPITAL NAME

Animal Health
Partners

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

Abdomen

REFERRING VET

Dr. Shannon
Westgarth

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

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.

INVOICE

14472

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

DATE

3/30/22



PATIENT

Brody Caranci A very small amount of gravity dependent biliary sludge is seen in the gallbladder.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

SPECIES

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

BREED

Saint Bernard Both coxofemoral joints present moderate to marked osteophyte new bone formation. The acetabular groove bilaterally is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim; R>L.

SEX

Neutered Male The periarticular bones of the right stifle joint present moderate osteophyte new bone formation and a moderate intracapsular soft tissue swelling is present. A TPLO implant is seen at the proximomedial aspect of the right tibia; the osteotomy is completely filled with trabecular bone.

COMPUTED TOMOGRAPHIC DIAGNOSIS

AGE

- 9 Years
- History of surgical management of right sided pathology of the cranial cruciate ligament by TPLO – osteotomy is in the remodeling phase
 - Moderate degenerative osteoarthritis right stifle joint and joint effusion
 - Degenerative osteoarthritis coxofemoral joints bilaterally
 - Pulmonary osteomas
 - Spondylosis deformans
 - Normal gastrointestinal tract

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study presents without abnormalities, explaining the current hyporexia. The gastrointestinal tract appears normal and no alterations of the normal mucosal lining are appreciated – ultrasound is more sensitive for abnormalities in the wall layering and inflammatory changes cannot be ruled out. If not done so yet, rule out underlying pancreatitis.

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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.

REFERRING VET

Dr. Shannon
Westgarth

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
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Neutered Male

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