



PATIENT PRESENTING CLINICAL SIGNS

Tyson Garcia Vomiting started 4/8, pancreatic enzymes significantly high and concern for pancreatitis- vomiting persisted despite therapy and patient began to have dark black liquid feces, oral ulcerations, anorexia and represented on 4/11 for evaluation.

SPECIES Abnormal PE/Chem/CBC/UA Results: Abdominal radiographs 4/11/22- concern for soft tissue changes at central abdomen Brief AFAST- concern for intrabdominal intestinal mass effect CBC: Canine Leukocytosis 22k, mild thrombocytopenia 88K Chemistry: hypoalbuminemia 2.2 g/dL, ALT 131 (H), ALP 253 (H) Recommended CT or full ultrasound based on radiographs and owner approved CT.

BREED COMPUTED TOMOGRAPHY OF THE ABDOMEN

Mastiff Mix A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

SEX COMPUTED TOMOGRAPHIC FINDINGS

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

AGE 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.

4 Years The adrenal glands are within normal limits for size, shape and organ architecture.

INTERPRETED BY Sebastian Schaub, DVM
Dr. med. vet. DipECVDI Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The common bile duct is significantly distended, measuring up to 11 mm in diameter; the common bile duct can be followed up to the region of the major duodenal papilla.

HOSPITAL NAME The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.
Petroglyph Animal Hospital

The stomach is moderately distended by fluid and appears adynamic. Most accentuated the pyloric antrum of the stomach and the pylorus present a significant thickening of the, measuring up to 2.0 cm in width. The fundic region of the stomach presents a mild to moderate thickening of the wall. Post contrast administration, the wall layering of the stomach is blurred. The duodenum is generalized mild to moderately distended by fluid attenuating material and gas; the mucosal layer is irregular.

REFERRING VET Whitney Jones

INVOICE The gastric lymph node is prominent.

51441 Both coxofemoral joints present moderate osteophyte new bone formation. The acetabular groove bilaterally is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim.

DATE COMPUTED TOMOGRAPHIC DIAGNOSIS

- 4-11-22
- Significant generalized mural thickening of the gastric wall with loss of wall-layering
 - Adynamic duodenum with irregular mucosal lining



PATIENT

Tyson Garcia

- Markedly dilated common bile duct
- Mild lymphadenopathy gastric lymph node
- Moderate degenerative osteoarthritis coxofemoral joints bilaterally, due to hip dysplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Canine

The findings are highly suggestive for severe (ulcerative) gastritis and duodenitis – given the history, underlying pancreatitis is considered likely. Accompanying ulceration of the mucosal lining of the stomach & duodenum are a plausible source for the melena. The dilation of the common bile duct can be a sequela to swelling level with the major duodenal papilla, causing increased resistance. Overall, I consider the odds for inflammatory origin high – besides the gastritis rule out helicobacter like organism, verminosis, fungal origin. Diffuse neoplastic infiltration of the gastric wall is a consideration as well, but the odds are considered low. If clinical signs are refractory to aggressive gastric-protection therapy – barium will also serve as a good gastric protective – gastroscopy/duodenoscopy including sampling for histopathology appear beneficial. Ultrasound guided FNA sampling of the gastric wall can be considered alternatively, but commonly does not provided reliable results.

BREED

Mastiff Mix

SEX

MN

There is no evidence of a gastrointestinal foreign body or signs of an intestinal mass, but the significant thickening of the gastric wall.

AGE

4 Years

Secondary reactive hyperplasia of the gastric lymph nodes.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Petroglyph Animal
Hospital

REFERRING VET

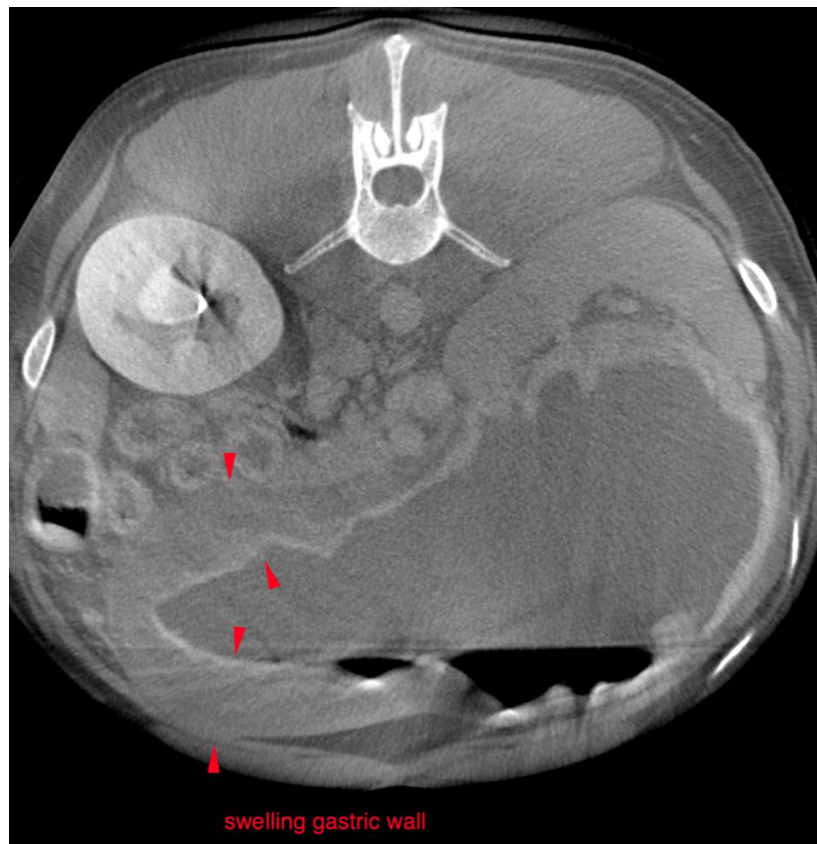
Whitney Jones

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SPECIES

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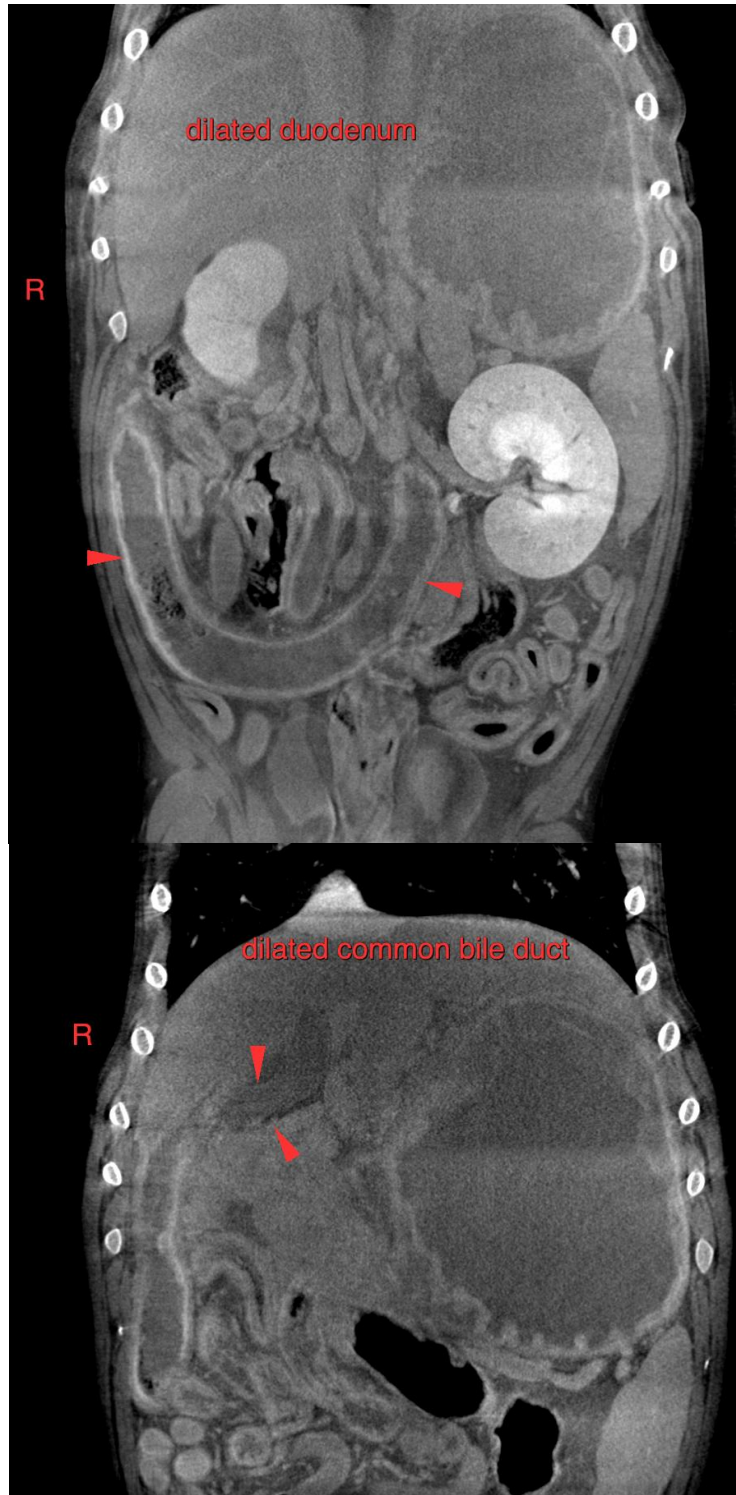
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PATIENT

Tyson Garcia

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

Mastiff Mix

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SEX

MN

AGE

4 Years

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