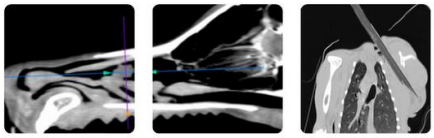


PATIENT

Fionna Otero

SPECIES

Canine

BREED

American Pit Bull

SEX

Intact Female

AGE

4Y

WEIGHT

42lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario San Francisco de Asis

REFERRING VET

Meaux

INVOICE

74574

DATE

4-14-26

PRESENTING CLINICAL SIGNS

STAT read please: Referred after rDVM radiographs determined P could not urinate. Owner reports several bouts of vomiting over the last 24 hrs. P just had a heat cycle and was having vaginal discharge thereafter so the owner opted to give OTC amoxicillin 500mg BID for 7-8 days. Labs from rDVM, unremarkable except elevated WBC. On radiographs, bladder is enlarged and occupying most of the abdomen, no mineral obstructions evident. A u-cath was passed with no evident pressure. Small amount of free fluid was collected from the abdomen. Based on fluid analysis, suspect abdominal fluid is urine. Patient is currently hospitalized until CT results available.

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen and thorax are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

The bony and surrounding soft tissue structures are within normal limits.

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.

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, but small zones with dystelectasis of the lung.

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

Abdomen

In the peritoneal cavity a moderate amount of gravity dependent, fluid attenuating material is appreciated. The peritoneal fat presents moderate soft tissue striation.

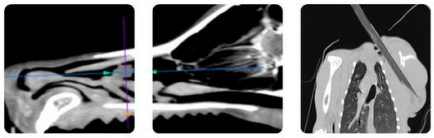
Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration the kidneys present a normal nephrogram in the early stage and fading contrast enhancement in the delayed series. No contrast excretion by the kidneys is appreciated. The urinary bladder is mildly distended. The urinary bladder wall is generalized thickened, measuring up to 5 mm, and smooth. The urethra presents no abnormalities.

The uterine horns are mild to moderate distended by fluid attenuating material.

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

The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

At the medial aspect of the cranial extremity of the spleen, a uniform soft tissue attenuating and post contrast mild irregular contrast enhancing mass is seen; measuring 22 mm in diameter. The splenic mass is protruding beyond the splenic surface.



PATIENT

Fionna Otero

SPECIES

Canine

BREED

American Pit Bull

SEX

Intact Female

AGE

4Y

WEIGHT

42lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

74574

DATE

4-14-26

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

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

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Lack of contrast excretion by the kidneys and fading nephrogram in the delayed phase
- Generalized thickened bladder wall
- No evidence of mechanical of bladder or urethral mass
- Fluid filled uterine horns
- Peritoneal effusion
- Splenic soft tissue nodule
- Normal thorax

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The lack of contrast excretion by the kidneys can indicate renal failure or is a sequela to impaired renal function due to decreased blood pressure during general anesthesia.

The fluid filled uterine horns can be indicative for pyometra, differentials include hemo-, hydro-, mucometra.

The peritoneal effusion can be a sequela to peritonitis accompanying pyometra, renal failure or a leakage from the urinary tract – due to the lack of contrast excretion evaluation of leakage from the ureters or bladder is not possible – consider complementing workup by a retrograde positive contrast urography. Other potentials for peritoneal effusion can include pancreatitis, hepatic disease, hypalbuminemia, systemic infection, vasculitis, paraneoplastic.

The splenic nodule is not specific and can present benign splenic nodular hyperplasia or primary splenic soft tissue neoplasia (e.g. lymphoma, sarcoma). Ultrasound guided FNA sampling can be performed for specification.

An underlying cause for the described enlargement of the urinary bladder cannot be specified – I do not see signs of mechanical obstruction – although uncommon in female patients, detrusor sphincter dyssynergia may be a potential.

PATIENT

Fionna Otero

SPECIES

Canine

BREED

American Pit Bull

SEX

Intact Female

AGE

4Y

WEIGHT

42lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

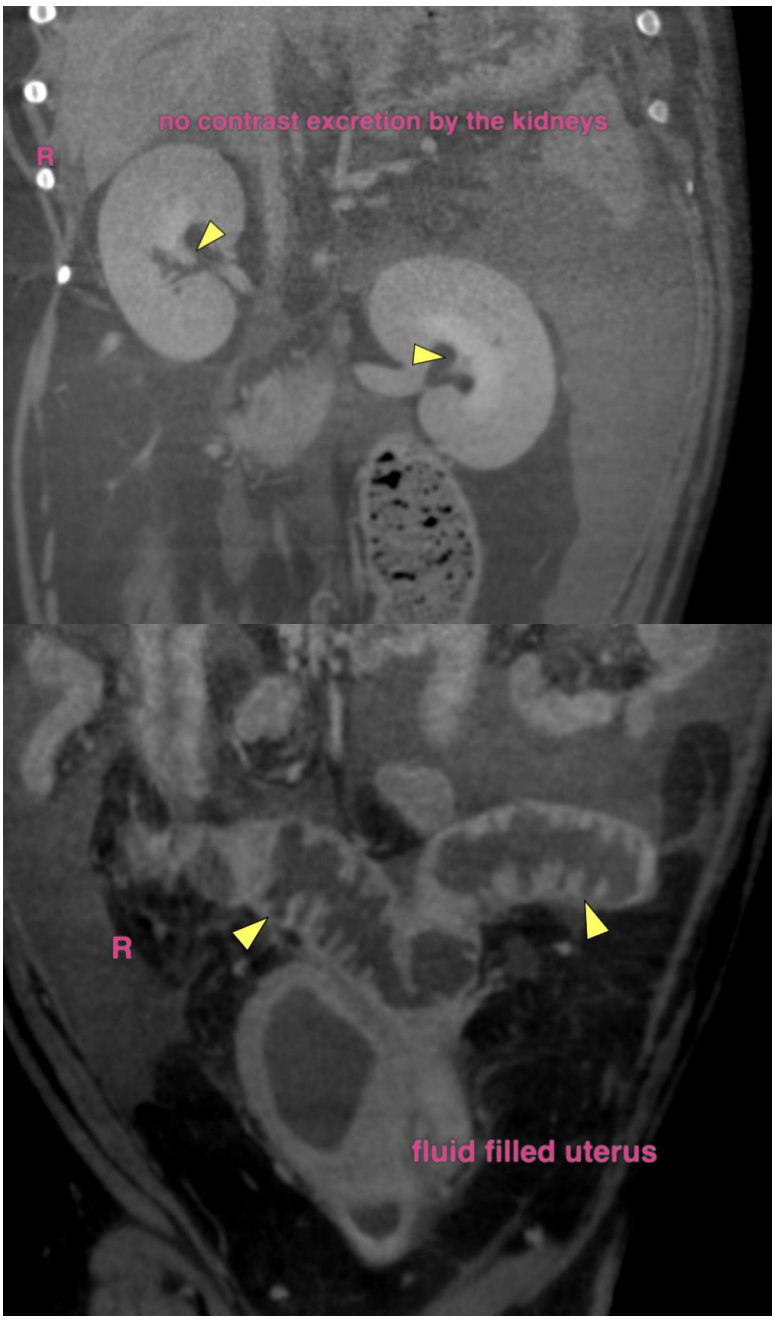
Meaux

INVOICE

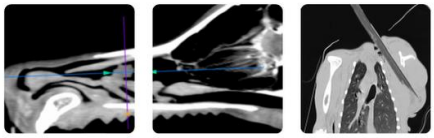
74574

DATE

4-14-26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™
SonoPath.com info@sonopath.com 1.800.838.4268



Teleradiology
Educational Teleconsultation Services™

PATIENT

Fionna Otero

SPECIES

Canine

BREED

American Pit Bull

SEX

Intact Female

AGE

4Y

WEIGHT

42lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

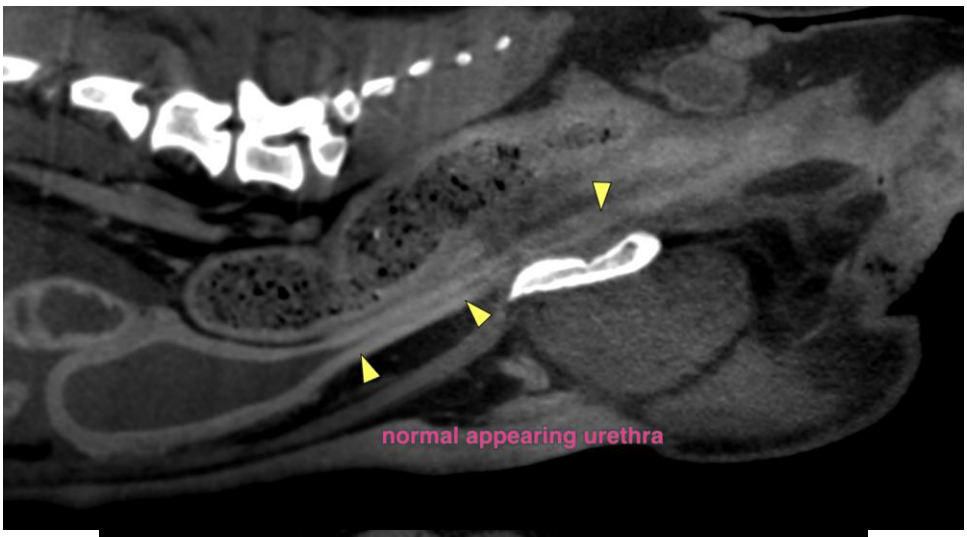
Meaux

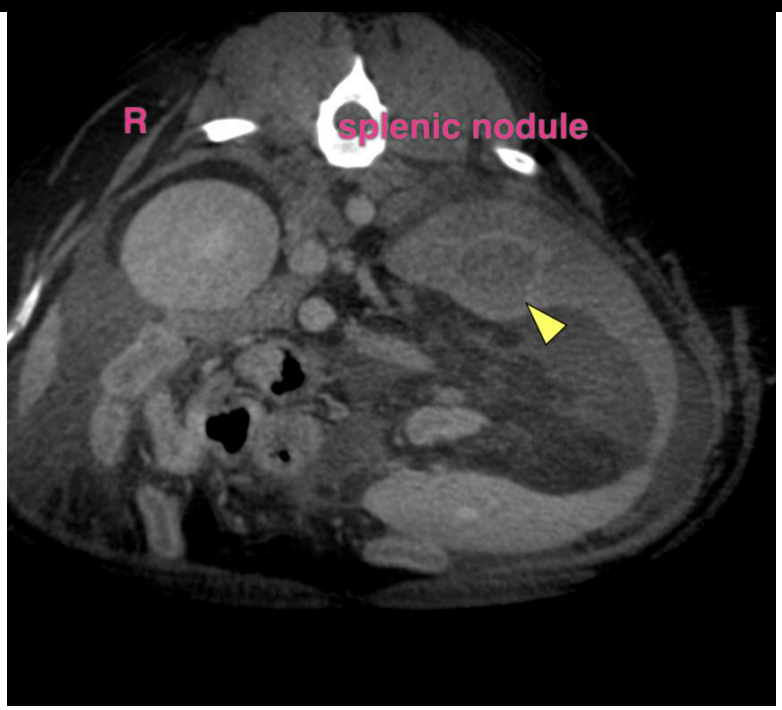
INVOICE

74574

DATE

4-14-26





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