



PATIENT PRESENTING CLINICAL SIGNS

Harper Kelley P vomited 6 time today and also ate a lot of grass. P also started having diarrhea the first two times were regular diarrhea and the 3rd stool was all grass. P also doesn't want to eat her own food but is drinking water. d/u ok no c/s O: BAR, m.m-pink, CRT<2sec, tacky, EENT, H/L, Abdo, U/G, skin and coat A: Gastroenteritis R/O F.B vs pancreatitis vs others P: recommended radiographs- send for review recommended Fecal test and giardia SQ Fluids 250ml LRS Cerenia 1.6ml SQ disp Metro 250mg 1 and 1/2 tab BID for 7 days Cerenia 24mg 2 tab SID for 2 days recommended if not better in 12-24 hrs bring for recheck or take to emergency clinic for Hosp. and IV support Diag- WNL CBC- WNL CPL- Normal

SPECIES

Canine

BREED

Mixed

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

A complete set of radiographs of the thorax & abdomen is provided for review.

RADIOGRAPHIC FINDINGS

SEX

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Thorax

The vertebral endplates T5/T6 present mild spondylosis formation.

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

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The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

INTERPRETED BY

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

HOSPITAL NAME

Animal Paradise Hospital

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

REFERRING VET

Dr. Elshafie

Abdomen

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 maintained throughout the peritoneal and retroperitoneal space.

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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. The splenic body and tail are considered normal for position, size, shape and opacity.

DATE

4-18-23

Both kidneys are seen and present 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.



PATIENT

Harper Kelley The stomach is in its anticipated position and empty, but a small amount of gas.

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.

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Canine

The colon is seen in the expected position and contains a small amount of unstructured foamy soft tissue material, is distended by gas and corrugated.

RADIOGRAPHIC DIAGNOSIS

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- Overall empty gastrointestinal tract
- Corrugated colon
- Normal thorax, but spondylosis deformans T5/T6

SEX

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The empty gastrointestinal tract and corrugated colon in combination with the presenting clinical signs are highly suggestive for gastroenteritis. There is no evidence of radiopaque foreign material, abnormal gas pattern or signs for gastrointestinal mechanical obstruction. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination; in some cases a high ileus may lack classical radiographic signs of mechanical obstruction.

AGE

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INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

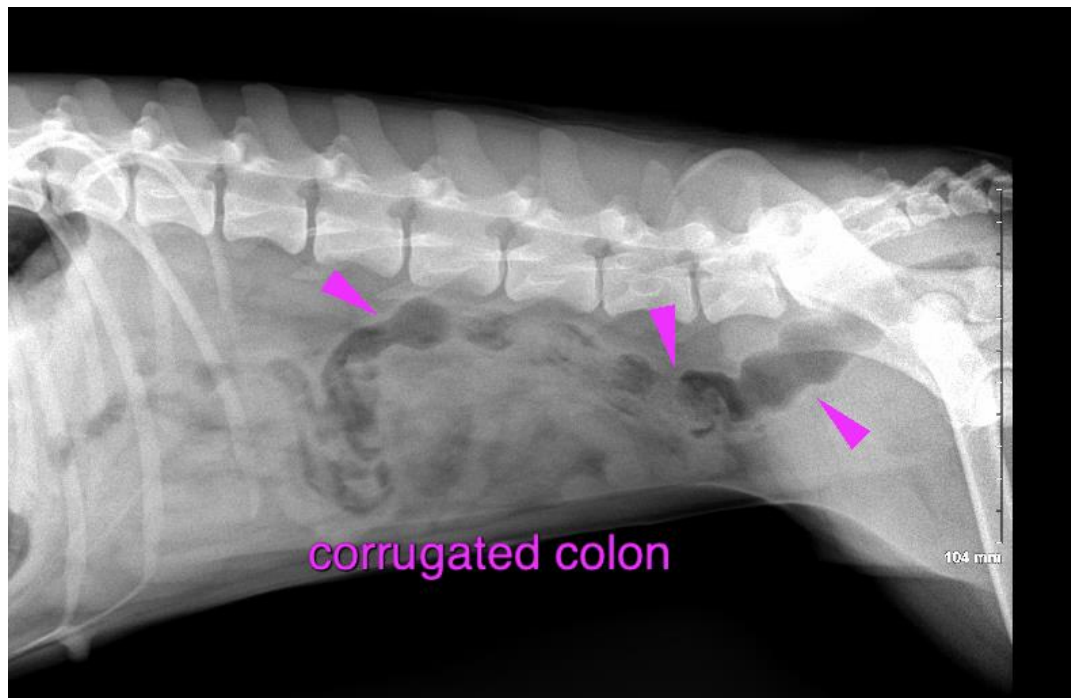
Dr. Elshafie

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DATE

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PATIENT

Harper Kelley

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.

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

Mixed

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AGE

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