



PATIENT

Buster Warden

PRESENTING CLINICAL SIGNS

diarrhea for few days
Abnormal PE/Chem/CBC/UA Results: unremarkable

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

Yorkshire Terrier Mix

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 maintained throughout the peritoneal and retroperitoneal space.

SEX

Male

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.

AGE

16 Months

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The stomach is in its anticipated position and is empty.

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 contains a small amount of gas.

HOSPITAL NAME

St. Catherines Animal
Hospital

RADIOGRAPHIC DIAGNOSIS

- Empty gastrointestinal tract

REFERRING VET

Dr. Boctor

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The empty gastrointestinal tract in combination with the presenting clinical signs is suggestive for enteritis ± gastritis. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. If clinical signs are refractory a complete abdominal ultrasound examination might be beneficial.

INVOICE

51836

DATE

4-30-22



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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.

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