



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Sasha Anderson
SPECIES Canine
BREED N/A

History: Presented for continued treatment of intermittent pancreatitis. P has been traveling cross country from Maryland, west with intentions of eventually moving to Hawaii. Approx. 1 month ago, P was diagnosed with pancreatitis and treated as an outpatient. P was last seen in Colorado on 3/30, Abdominal rads NSF with possible foreign gastric material seen, no obstructive pattern, P was continued on supportive care of oral cerenia and entyce. O reports the last 2 days P has shown no interest in food and has had some mild spit up/vomiting after entyce was administered.

Abnormal PE/Chem/CBC/UA Results: BW ran in house -- BUN <5 (7-25) L, GLU 114 (6-110) H, HCT 55, LYM 0.8 PE - panting, vitals WNL. Non painful on abdominal palpation, stiff gait with severe crepitus in stifles bilaterally. Hx of bilateral elbow dysplasia.

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

Spayed Female

RADIOGRAPHIC FINDINGS

AGE 13 Years

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.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

The hepatic volume is mild to moderately increased the liver is protruding beyond the costal arch; the gastric axis is deviated caudally. The caudoventral hepatic margins are rounded.

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.

HOSPITAL NAME

Boca Park AH

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.

REFERRING VET

Dr. Ashman

The stomach is in its anticipated position and empty but a small amount of gas, accentuating the gastric rugal folds.

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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The colon is seen in the expected position and presents with appropriate content.

RADIOGRAPHIC DIAGNOSIS

DATE

4/6/22



PATIENT

- Mild hepatomegaly
- Empty stomach

Sasha Anderson

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Canine

The empty stomach is a sequela to the presenting clinical signs, but no specific underlying pathology can be appreciated in the current set of radiographs of the abdomen. If clinical signs are refractory to therapy, recommend a complete abdominal ultrasound examination.

BREED

N/A

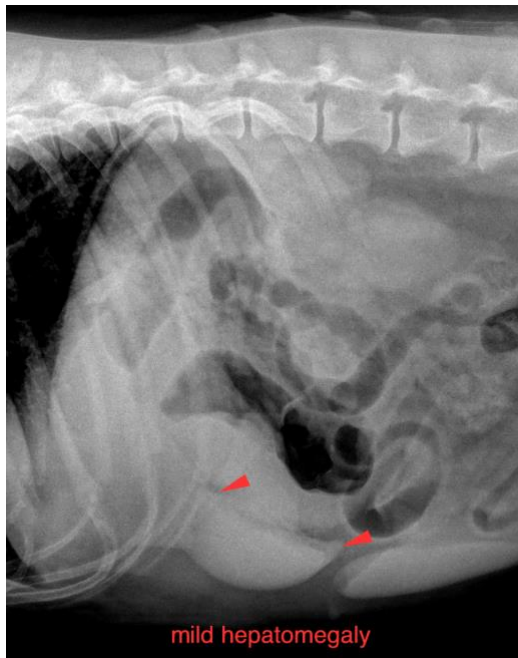
Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy, hepatitis or neoplastic infiltration. Ultrasound including FNA sampling can be used as minimally advanced diagnostic tests.

SEX

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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. Ashman

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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Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com

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