



PATIENT

Duke Nay

SPECIES

Canine

BREED

Pit Bull Mix

SEX

Male

AGE

9Y, 4M

WEIGHT

55.8

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Carissa Hayden

HOSPITAL NAME

Elizabeth Animal
Hospital

REFERRING VET

Kim Allyn, DVM

INVOICE

74548

DATE

4-9-26

PRESENTING CLINICAL SIGNS

Noticed yesterday that he was acting a little off.

-He did throw up some grass yesterday.

-Last night he was moving really slow.

-This morning he didn't want to eat or drink.

-tried to give him some meat and he was groaning.

- He did have a rib bone that the other dogs wanted so owner is thinking he might have eaten it.

-He has been eating after birth from the cows.

Abnormal PE/Chem/CBC/UA Results: PE: Behavior/Mentation: Depressed and lethargic; appears uncomfortable and does not feel well. Abdomen: Uncomfortable to cranial abdominal palpation
Musculoskeletal: Stiff, moving stiff and sore, with a mild hunchback posture. NO RECENT BLOOD WORK

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

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 peritoneal fat presents mild soft tissue striation.

An ovoid shaped gas opacity is superimposed on the right division of the liver – approximately in the region of the gallbladder.

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.

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.

The stomach is in its anticipated position and presents normal content.

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 presents with appropriate content.

RADIOGRAPHIC DIAGNOSIS

- Cavitory gas opaque lesion right division of the liver
- Suspect mild peritoneal effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The large gas opacity superimposed on the liver can present a hepatic abscess, emphysematous cholecystitis/pneumobilia, necrosis of a hepatic mass, incompetence of the sphincter of Oddi with reflux of gas via the common bile duct. Advanced imaging such as an abdominal ultrasound examination or CT are advised for potential surgical planning.

The supposed mild peritoneal effusion can be a sequela to hepatic disease.



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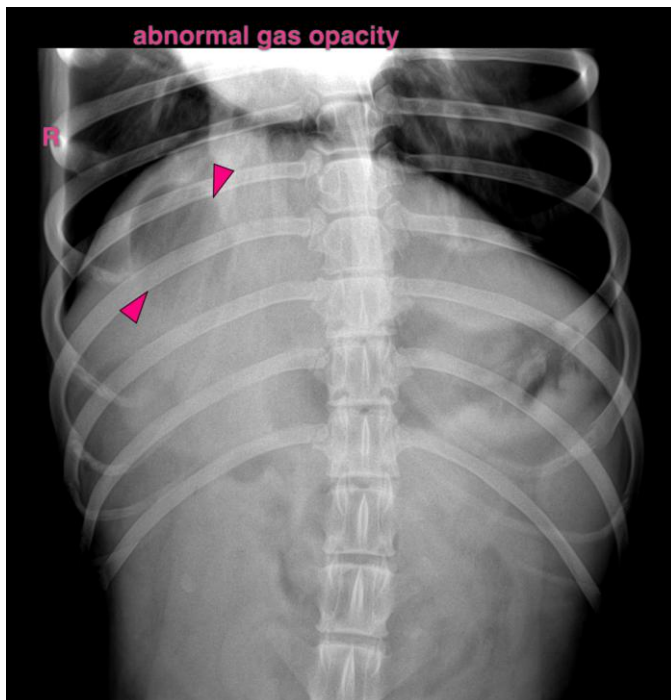
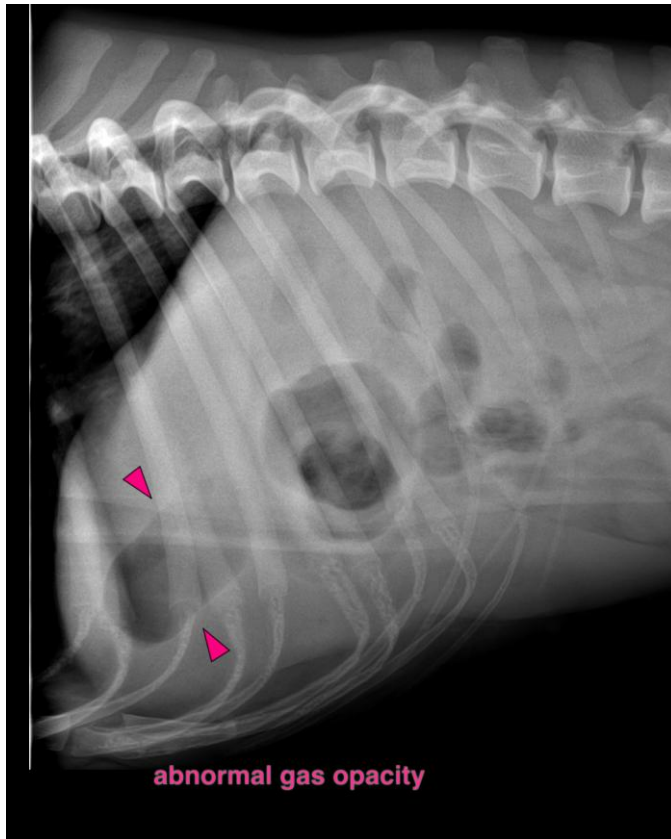
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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