



**PATIENT PRESENTING CLINICAL SIGNS**

Sophy Toro Date: 3/1/2022 Reason for Visit: HERNIA History: P IS A 10YR OLD F/S SCHNAUZER PRESENTING TODAY FOR ABDOMINAL ULTRASOUND. O STATES P VERY ANXIOUS GETS VERY SHAKY/TREMLES HAS HAD BOUTS OF DIARRHEA O CONCERNED ABOUT CUSHINGS. RAVENOUS APPETITE AND DRINKS ALOT. ELEVATED ALK PHOS AND OTHER LIVER ENZYMES ELEVATED. O HAS HAD P SINCE PUPPY ALWAYS HAS SENSITIVE STOMACH AND SKIN. O BEEN ADDING GINGER TO FOOD HELPING WITH DIARRHEA. O STATES P IS SCAVENGER WILL EAT ANYTHING ON FLOOR. P HAD EPISODE OF SHAKING 3-4 DAYS AGO URINATED ON COUCH VERY UNUSUAL FOR PET O DOES NOT BELIEVE SEIZURE.

Abnormal PE/Chem/CBC/UA Results: AUS Results: 1) Diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory and infiltrative disease are considered less likely. 2) Cystic calculi 3) Minor, age-related renal changes Recommendations: 1) Liver--> LDDS test to r/o HAC, +/- liver FNA if LDDS is negative, Continue Denamarin and add Ursodiol. 2) Bladder stone --> switch to C/D multicare x 1mo., antibiotic tx- Clavamox 250mg #2 strips LDDSt Results: Cortisol baseline 7.8 (1.0-6.0) Cortisol 4hr Post: 0.4 Cortisol 8hr Post: 10.2 - results may support a dx of PDH

**SPECIES**

Canine

**BREED**

Schnauzer

**SEX**

SF

**AGE**

10 Years, 3 Months

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary Hospital

**REFERRING VET**

Dr. Rivera

**INVOICE**

52163

**DATE**

5-28-22

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**RADIOGRAPHIC FINDINGS**

The body condition score is 9/9.

In the VD view, the cranial abdomen is cropped by the field of view.

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.

The hepatic volume is moderately increased the liver is protruding beyond the costal arch; the gastric axis is mildly 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.

The left kidney presents with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. In the lateral view, a mineral opaque body, measuring 3.8 mm in size is superimposed on the urinary bladder and overlying small intestinal loops.

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.



**PATIENT**

Sophy Toro

**RADIOGRAPHIC DIAGNOSIS**

- Obesity
- Hepatomegaly
- Cystolithiasis versus superimposed mineralized content of the small intestinal tract

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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.

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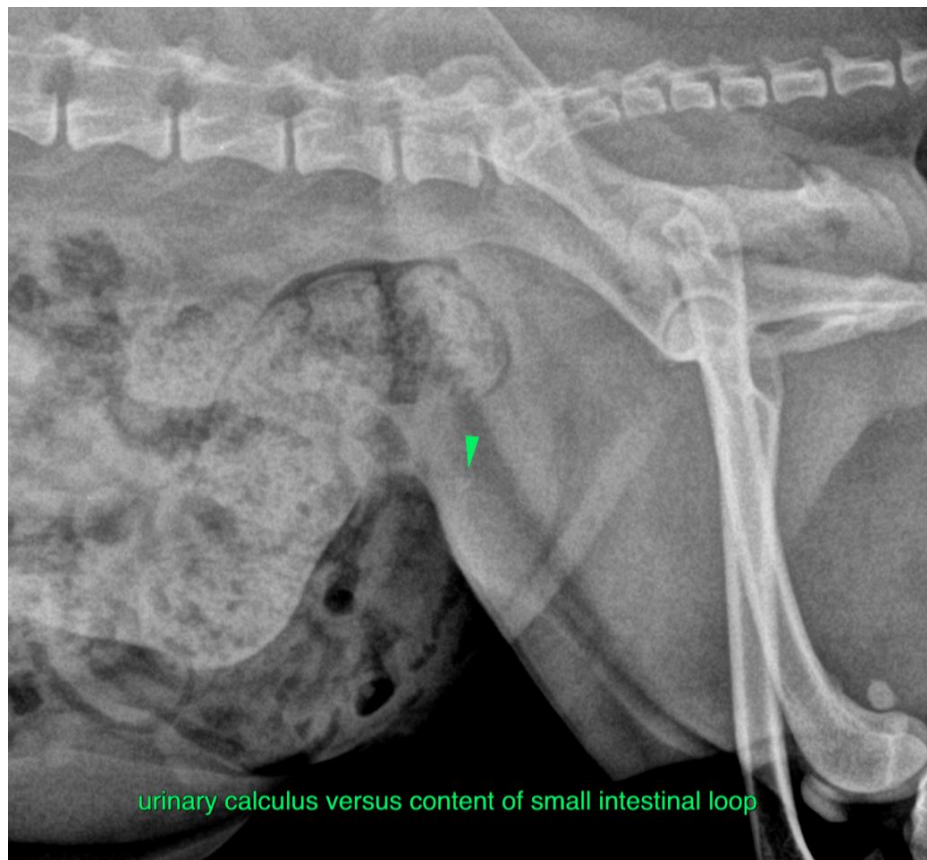
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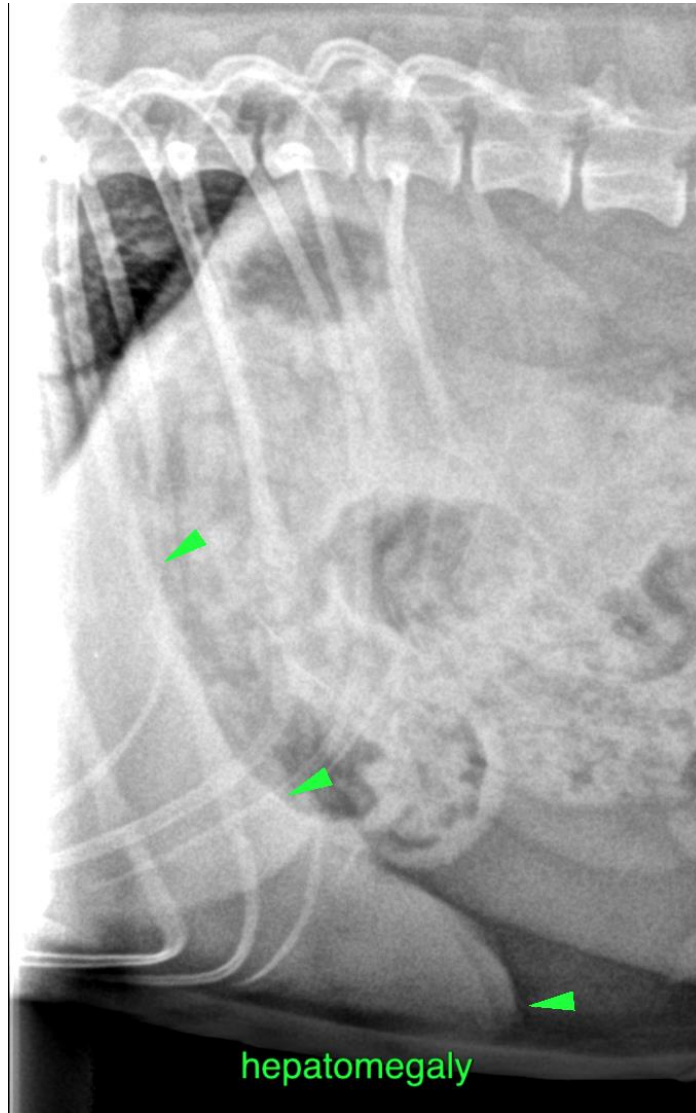
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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