



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Kiper Worton
SPECIES Canine
BREED Havanese
SEX Male
AGE 9 Months

History: Kipper, a 9-month-old Male Neutered Havanese, was presented to the Toronto Animal Health Partners Surgery Service for evaluation of a shunt. Pre-anesthetic bloodwork for neuter had abnormalities, suspect liver shunt. Normal EDUD; No VDSC; Energy Kipper has had a previous history of: - Right pelvic limb twists as he walks - neuro? Kipper current medications: - Cerenia for long drives Kipper is currently eating freeze dried raw turkey and meal mix, with no history of allergies. Kipper is UTD on vaccines. Last meal at 6:30AM

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Abnormal PE/Chem/CBC/UA Results: Suspect liver shunt due to bloodwork abnormalities
 Abnormal Blood Results: High-Reticulocytes 134.3 (Reticulocyte 24.5 - 31.8) High- Glucose 6.5: (3.5 - 6.3 mmol/L) High- Urea (BUN): 12.0 3.2 - 11.0 mmol/L High- ALT 131 18 - 121 IU/L Hemolysis Index ++ Lipemia Index + High- Bile Acids: 24 (0.0 - 14.9 umol/L)

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

A pre- and post-contrast CT study of the abdomen in a bone and soft tissue reconstruction are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

9 Months
 The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

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Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable. At the medial aspect of the cranial extremity of the spleen, an ovoid shaped body, presenting the same attenuation and contrast enhancement pattern like the spleen is appreciated, measuring 16 x 9 x 14 mm in size.

REFERRING VET

Dr. Lea Mehrkens

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

A separate left & right caudal vena cava of the pre-renal segment is appreciated.

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The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

DATE

6/15/22



PATIENT

Kiper Worton

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

SPECIES

Canine

- No evidence of portosystemic shunting, neither intra- nor extrahepatic
- Incidental Splenunculus
- Incidental double caudal vena cava, pre-renal segment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Havanese

No macroscopic vascular bypass of the liver was noted in the pre- and post-contrast studies of the abdomen. However, if the clinical signs are consistent with insufficiency of the liver primary non-cirrhotic portal hypertension (microvascular dysplasia) or other diffuse parenchymal liver disease would still be a potential and should be ruled out by means of ultrasound guided or surgical liver biopsy.

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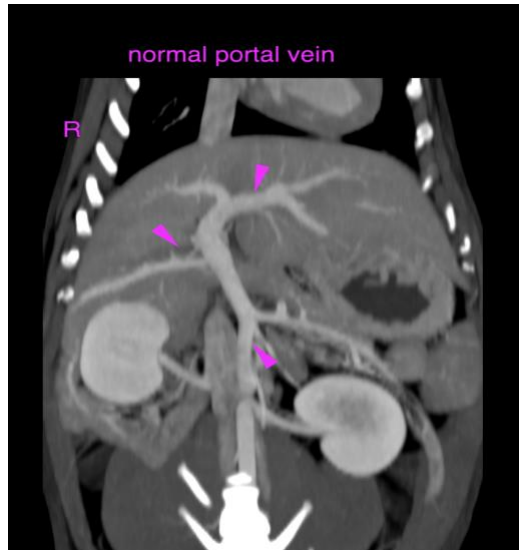
Havanese

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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.

INTERPRETED BY

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