



**PATIENT PRESENTING CLINICAL SIGNS**

Bella Apel Decreased appetite and lethargy for 1 week, still eating treats. Vomiting and diarrhea for 2 days. Straining to defecate.  
Abnormal PE/Chem/CBC/UA Results: Anaplasmosis positive. CBC: WNL. Decreased PLT and PCT

**SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**RADIOGRAPHIC FINDINGS**

**BREED**  
Goldendoodle The intervertebral disc space L3/L4 is moderately narrowed and the respective vertebral endplates present moderate spondylosis formation. Well-defined convex shaped mineral opaque material is superimposed on the ventral aspect of the neuroforamina L3/L4.

**SEX** No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

**FS** The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in size and is protruding caudally beyond the costal arch, the caudoventral hepatic margins are pointed.

**AGE** 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.

12 Years, 10 Months

**INTERPRETED BY**

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.

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The stomach is in its anticipated position and is mild to moderately distended by gas.

**HOSPITAL NAME**

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.

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

**RADIOGRAPHIC DIAGNOSIS**

- Empty and mild gas distended stomach
- Chronic discopathy L3/L4
- Suspect relaxation of the hepatic

**REFERRING VET**

Dr. Nicole Norris-  
Carney

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The gas distended stomach can be a sequela to the history of vomiting and might be exacerbated by stress. The presumptive diagnosis is gastroenteritis – e.g. pancreatitis, dietary indiscretion, parasitic infection. There is no evidence of radiopaque foreign material, abnormal gas pattern or signs for gastrointestinal mechanical obstruction. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination; in some cases a high ileus may lack classical radiographic signs of mechanical obstruction.

**INVOICE**

59097

**DATE**

6-29-23



**PATIENT**

Bella Apel

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.

**SPECIES**

Canine

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](mailto:info@sonopath.com)

**BREED**

Goldendoodle

**SEX**

FS

**AGE**

12 Years, 10 Months

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