



**PATIENT**

Gertrude Armstrong

**PRESENTING CLINICAL SIGNS**

She was up all night rattling the gate to the laundry room and then going outside. She was urgent about needing to urinate. 7 am Brooke left her outside for a while. She then peed again and it was dark with blood and mucousy. She has frequent small urination with blood. Brooke then gave her some water and then she threw up 4 times after drinking and then again a little later. She urinated again when she got here and it was a very small dark yellow streak. Gertrude then urinated in the exam room here, she started to leak the bloody urine. She then had bloody diarrhea on the way out the clinic.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: BLOODY URINE ON X-RAY Oral: Normal examination SAVE HYDRATION AND PALE Rectal Exam: Watery, blood tinged material. CBC: Good Chem: Good Urine: Dilution done. UTI- Rods

**BREED**

Rottweiler

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**SEX**

FS

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**AGE**

6 Years, 3 Months

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 liver is appropriate in position, size and presents uniform opacity.

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 small and located in a relative caudal position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

**HOSPITAL NAME**

Elizabeth Animal Hospital

The stomach is in its anticipated position and contains a small amount of fluid and mild granular mineralized material is appreciated in the pyloric region.

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.

**REFERRING VET**

Leon Anderson, DVM

The colon is seen in the expected position and moderately distended by fluid. The colon appears rigid.

**INVOICE**

52669

**RADIOGRAPHIC DIAGNOSIS**

- Fluid filled colon
- Mild fluid filled stomach
- Empty urinary bladder

**DATE**

7-2-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The fluid filled colon and potential delayed gastric emptying are suggestive for gastroenteritis. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction.



**PATIENT**

Gertrude Armstrong

No abnormality is appreciated, explaining the accompanying pigmenturia. Rule out intoxication as source for both the pigmenturia and the gastrointestinal clinical signs – rule out intoxication (e.g. onions or garlic) or infectious causes (e.g. leptospirosis).

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**HOSPITAL NAME**

Elizabeth Animal  
Hospital

**REFERRING VET**

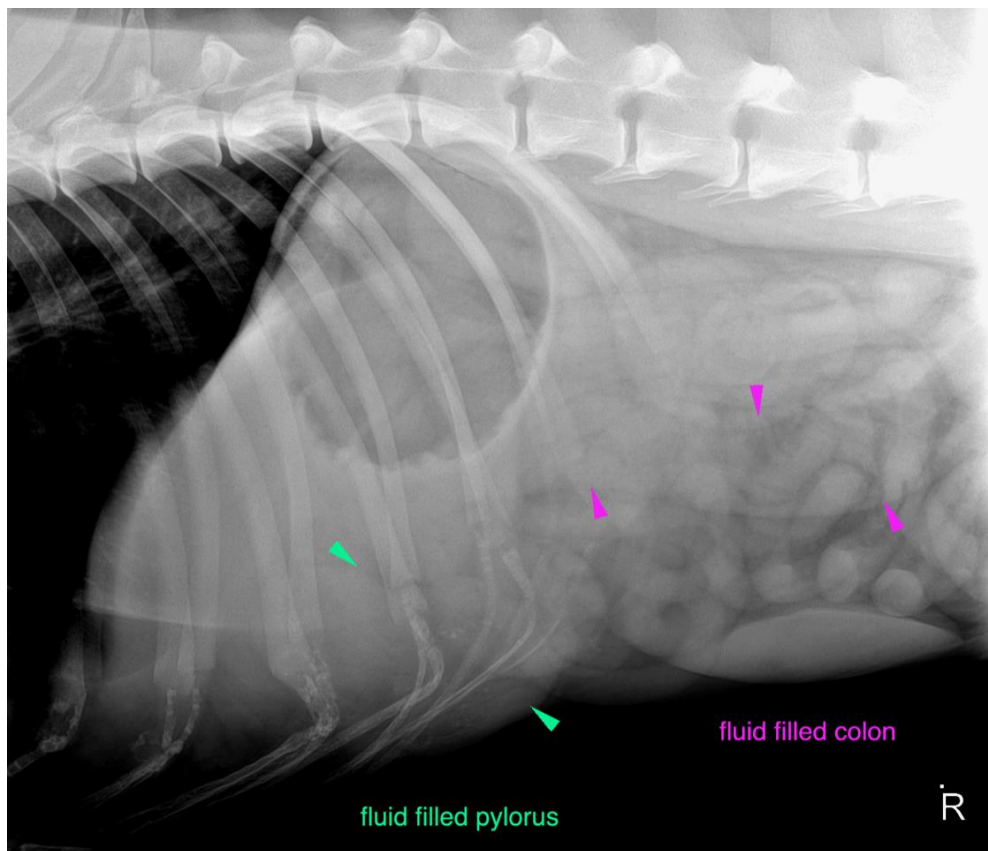
Leon Anderson, DVM

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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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