



PATIENT PRESENTING CLINICAL SIGNS

Joplin Rescue
 Suspicion of portal systemic shunt. Abdominal U/S revealed multiple doppler flows from portal vein to the vena cava. Turbulence noted in the vena cava. The left kidney medulla was anechoic versus the right. Normal adrenals, SI, LI, lymph nodes seen, urinary bladder, gull bladder and pancreas. P had ovariohysterectomy surgery on 8/29/22.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Bile Acid Test- postprandial was abnormal. Chem 17 and CBC was within normal limits.

COMPUTED TOMOGRAPHY OF THE ABDOMEN

BREED

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

Chihuahua

COMPUTED TOMOGRAPHIC FINDINGS

In the peritoneal cavity, a mild amount of free gas is seen, and mild fat-stranding of the peritoneal fat is appreciated. In the midline, the ventral abdominal wall presents evidence of preceding laparotomy.

SEX

FS

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.

AGE

23 Weeks, 6 Days

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

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

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.

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

HOSPITAL NAME

Casselton Vet Service

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

The bony and surrounding soft tissue structures reveal no abnormalities.

REFERRING VET

Brad Bartholomay

COMPUTED TOMOGRAPHIC DIAGNOSIS

- No evidence of portosystemic shunting, neither intra- nor extrahepatic
- History of preceding ovariohysterectomy with subsequent mild pneumoperitoneum and mild peritonitis – considered

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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.

DATE

8-30-22



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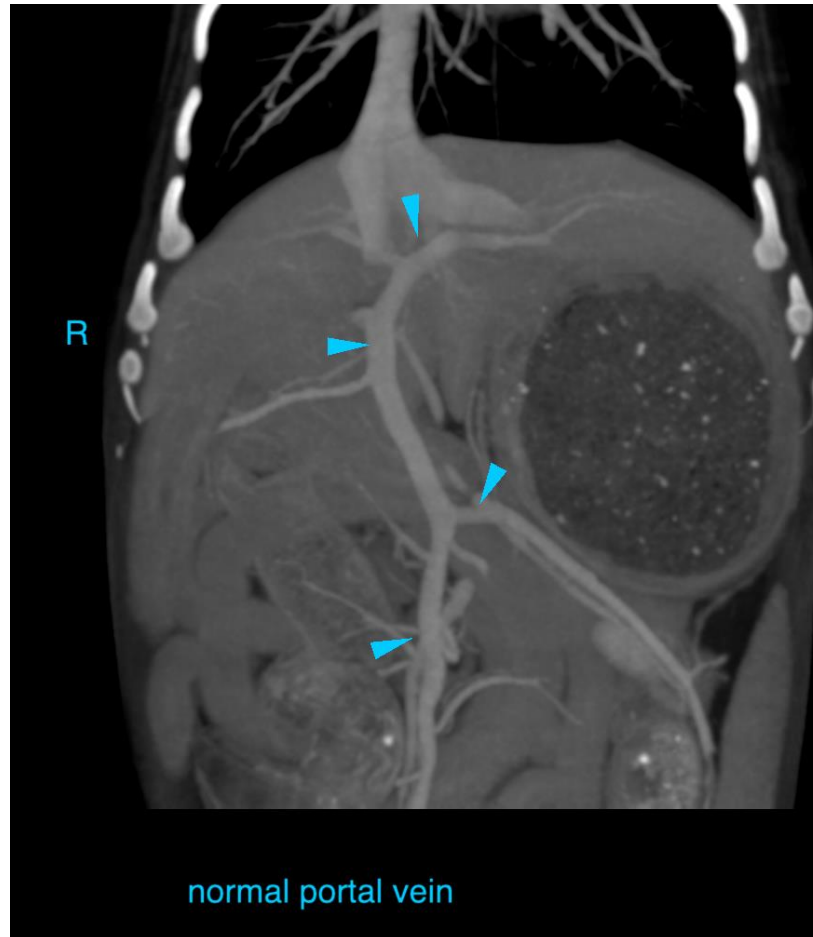
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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