



PATIENT PRESENTING CLINICAL SIGNS

Lola Schneider History of IMHA that was diagnosed 3/2021. Pt had been tapered off prednisone in August successfully. Presented with fever, loss of appetite, not drinking and weakness. Pt was found to have severe neutropenia (0.08 K/microL). Pt has been hospitalized (9/15) and developed mild anemia (mild decrease in HCT, 9/16), but likely due to dilution from IV fluids. Has been improving this past day though the first day hadn't been doing well the first 1.5 days with anorexia (though would eat for owners some when they would visit) and lethargy. Looking for cause of neutropenia, loss of appetite, lethargy; ruling out neoplasia.
 Abnormal PE/Chem/CBC/UA Results: Considerable dental disease, quiet heart murmur noted today, mild muscle atrophy (generalized). PE otherwise fairly unremarkable. Leukopenia characterized by severe neutropenia (0.08 K/microL), and lymphopenia (0.84 K/microL). Chemistry WNL. Urinalysis last performed 8/18/21, unremarkable.

SPECIES

Canine

BREED

Dachshund Short Hair

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

SEX

FS

A high resolution post-contrast CT study of the skull and abdomen and a plain CT study of the thorax are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

AGE

13 Years

Thorax

The intervertebral discs T11/T12 and T12/T13 are moderately protruding into the vertebral canal, mildly distorting the dural tube at the same level.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform and considered within normal limits.

HOSPITAL NAME

Petroglyph Animal Hospital

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

REFERRING VET

Amanda Espinosa

The lung presents a generalized reduced volume and the caudal and middle lung lobes present multiple regions with peripheral dystelectasis of the lung parenchyma.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

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Abdomen

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

DATE

9-17-21

Both kidneys present mild irregular margins. After contrast administration multiple variable sized, well-defined spherical filling defects are noted throughout the renal cortex bilaterally - measuring up to 2.8 mm in diameter.



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

Lola Schneider The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

SPECIES The hepatic parenchymal presents multiple variable shaped, well-defined, parenchymal filling defects, measuring up to 4 mm in size.

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A moderate amount of mild granular mineral attenuating gravity dependent material is visible in the region of the gallbladder neck. Post contrast administration the wall of the gallbladder is mildly thickened measuring 0.85 mm in width, the wall-layering is maintained. The common bile duct is mildly dilated, measuring 2.4 mm in diameter and contains a very small amount of mineral attenuating material level with the papilla duodeni major.

SEX

Originating from the left gastric vein, a thin tortuous anomalous vessel is extending dorsally and cranially extending to the azygos vein.

FS

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

AGE

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The gastric wall is generalized prominent with a width of 5 mm and post contrast mild hypoattenuating outer layer. The rugal folds are prominent.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Multiple intervertebral discs of the lumbar spine are mildly protruding into the vertebral canal

COMPUTED TOMOGRAPHIC DIAGNOSIS

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Petroglyph Animal
Hospital

- Generalized mild edema of the gastric wall
- Chronic renal infarction with multiple renal cortical cysts
- Mild dilation of the common bile duct without evidence of obstruction
- Mild edema gallbladder wall
- Mineralized biliary sludge
- Single congenital extrahepatic portosystemic shunt, left gastric vein to azygos vein (porto-azygos shunt)
- Hepatic cysts
- Multifocal intervertebral disc protrusions with possible dynamic mild myelocompression
- Dystelectasis of the peripheral aspects of the lung, due to general anesthesia

REFERRING VET

Amanda Espinosa

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The findings of the stomach are suggestive for underlying gastritis and mild cholecystitis.

The small portosystemic shunt is likely an incidental finding with a small shunting volume as the intrahepatic portal vasculature is well-developed.

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No specific abnormality is appreciated explaining the significant neutropenia. Consider a bone marrow examination for further workup.



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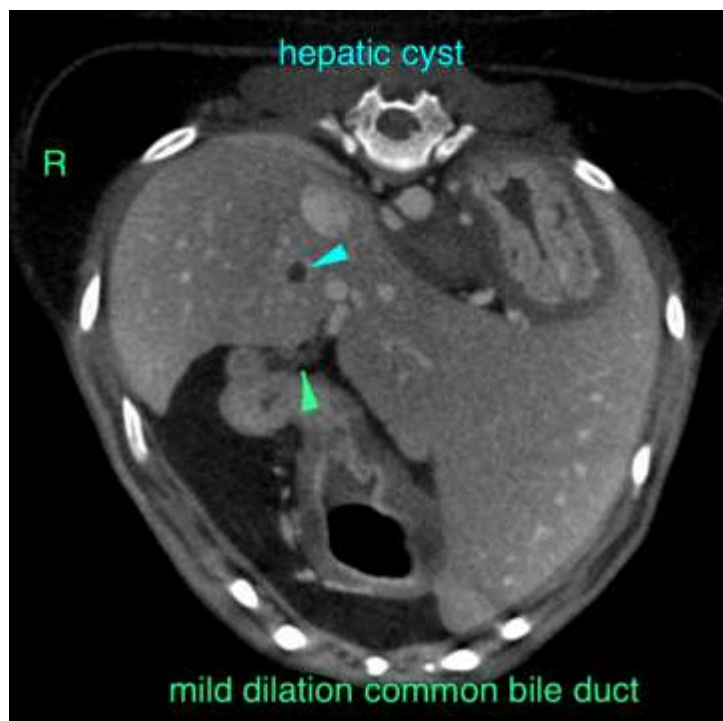
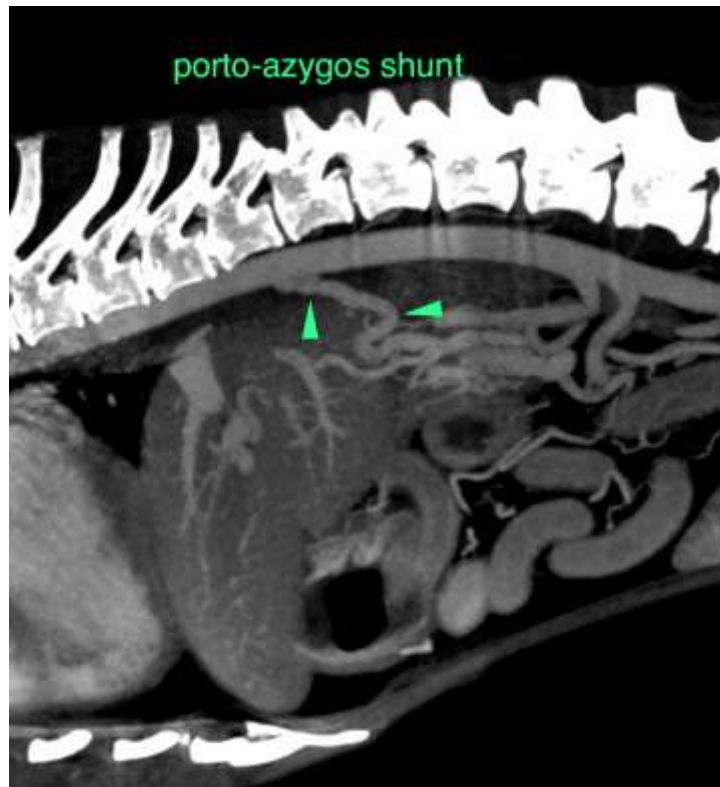
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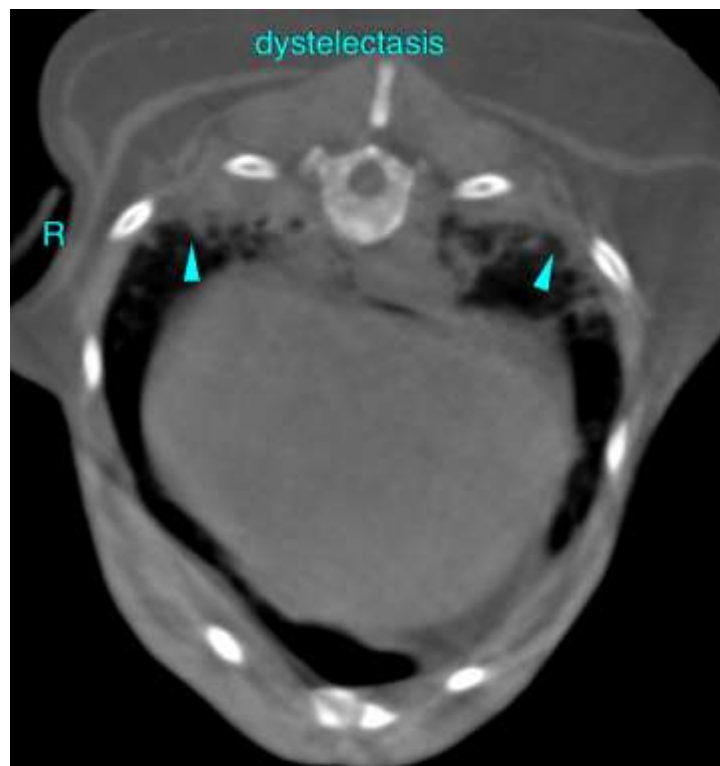
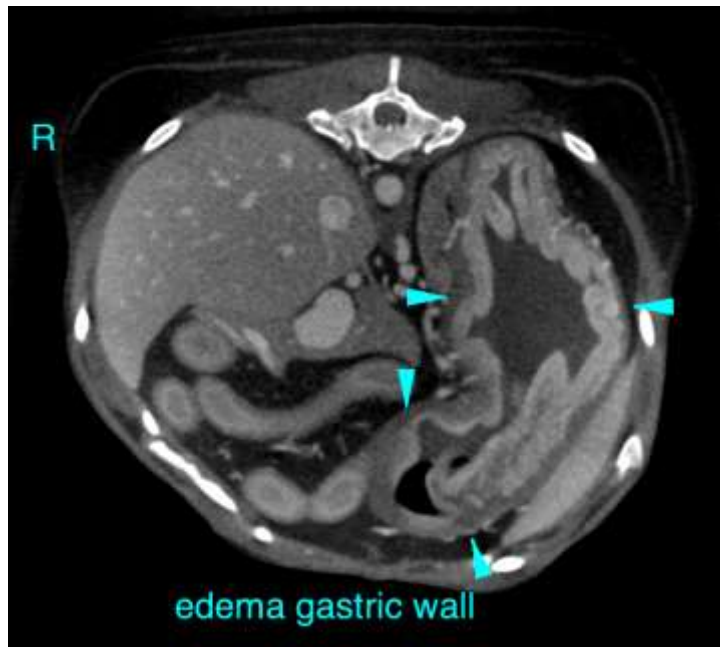
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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