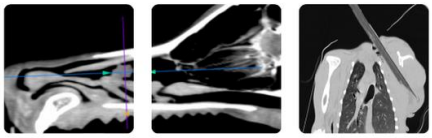

PATIENT

Vida Mejias

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

F

AGE

2Y

WEIGHT

4.3kg

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

74755

DATE

4-22-26

PRESENTING CLINICAL SIGNS

Suspected portosystemic shunt.

COMPUTED TOMOGRAPHIC STUDY OF ABDOMEN

A pre- and post-contrast CT study of the abdomen was provided for review, totaling three series: one pre-contrast series and two post-contrast series acquired using a soft tissue algorithm (portal venous phase and delayed).

COMPUTED TOMOGRAPHIC FINDINGS

The liver is mildly reduced in volume (microhepatia), with smooth margins and homogeneous parenchymal attenuation, demonstrating uniform contrast enhancement.

The portal vein and its tributaries (splenic vein, left gastric vein, and pancreatoduodenal vein) are normal in diameter and anatomical course. The intrahepatic portal branches are within normal limits. No anomalous portosystemic vascular communication is identified.

The gallbladder is moderately distended, containing homogeneous hypoattenuating content. The cystic duct and common bile duct are within normal limits.

The spleen is normal in size, shape, and attenuation, with homogeneous contrast enhancement.

The pancreas, adrenal glands, and abdominal lymph nodes are unremarkable.

The kidneys are normal in size, shape, contour, and attenuation pre- and post-contrast. No evidence of mineral-attenuating calculi. The renal pelvises and ureters are within normal limits

The urinary bladder is mildly to moderately distended, containing hypoattenuating fluid with a small amount of hyperattenuating contrast material. The bladder wall is normal. No evidence of radiopaque urolithiasis.

The gastrointestinal tract is normally distended and appropriately distributed, with normal wall thickness. The colon contains gas and heterogeneous fecal material.

The uterine horns are mildly enlarged, with subtly thickened walls and a small amount of hypoattenuating intraluminal content. The right uterine horn measures approximately 6.1 mm and the left approximately 4.4 mm. The ovaries are within normal limits.

The serosal fat and musculoskeletal structures are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild microhepatia.
- No computed tomographic evidence of congenital extrahepatic or intrahepatic portosystemic shunt.

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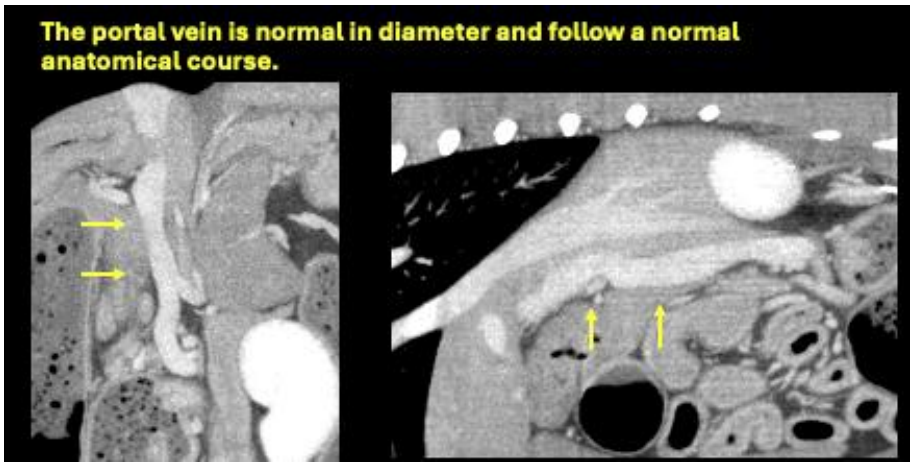
- Mild uterine enlargement with intraluminal fluid content. Differential diagnoses include physiological changes related to the estrous cycle (proestrus/estrus), cystic endometrial hyperplasia, and/or mucometra.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no tomographic evidence of a congenital portosystemic shunt. The portal venous system is normal in caliber and course.

The presence of microhepatia, particularly if associated with elevated bile acids, raises suspicion for hepatic microvascular dysplasia or other functional hepatopathies. Correlation with biochemical testing is recommended. Repeat bile acid stimulation testing is advised; if abnormalities persist, further evaluation for microvascular dysplasia or other hepatic functional disorders should be considered.

The uterine findings are mild and may be physiological, depending on the stage of the estrous cycle. Early cystic endometrial hyperplasia or mucometra cannot be excluded. Correlation with clinical findings is recommended, and vaginal cytology and/or ultrasonographic follow-up may be considered if clinically indicated.



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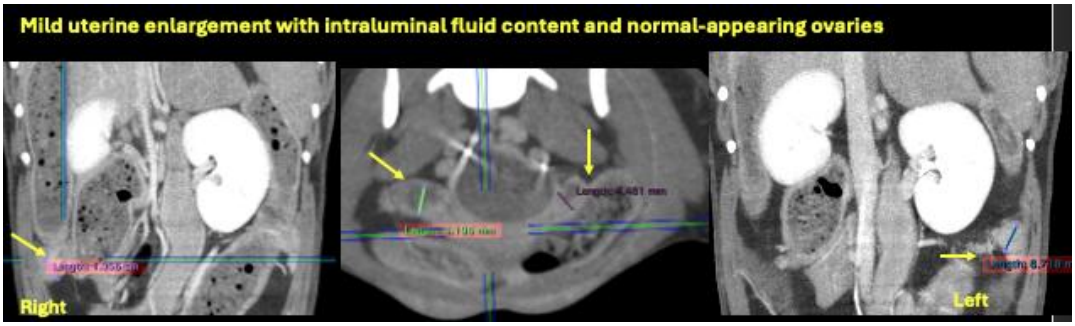

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com