



PATIENT PRESENTING CLINICAL SIGNS

Milo Allain P has a history of liver enzymes high for a few weeks (ALT, AST), WBC (>30.000) with Neutrophils high (>30.000), Mono and lympho high too. Also has dry cough, p was on AB didn't get better. Creatinine and BUN wnl.

SPECIES Abnormal PE/Chem/CBC/UA Results: Leukocytosis, Neutrophilia, Monocytosis. Liver enzymes high.

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

BREED A pre- and post-contrast CT study of thorax and abdomen are provided for review totaling 4 series. One pre-contrast series of the abdomen, soft tissue algorithm. Two post-contrast series of the abdomen, soft tissue algorithm. One post-contrast series of the thorax, bone algorithm.

Lhasa Apso

COMPUTED TOMOGRAPHIC FINDINGS

SEX THORAX

Male Neutered The trachea and main bronchus are normal.

The pulmonary parenchyma is normal in attenuation.

AGE

3 Years

The cardiac silhouette and pulmonary vessels are normal. The contrast media adequately fills the cardiac chambers and vessels on post-contrast series.

The pleural space and mediastinum are normal. No evidence of enlarged mediastinal lymph nodes.

INTERPRETED BY

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

The thoracic esophagus is mildly distended by intraluminal gas content, likely correlated to the anesthesia.

The diaphragm and thoracic wall are normal.

HOSPITAL NAME ABDOMEN

Mobile Pet Imaging

The liver is homogeneously soft tissue attenuating and uniformly contrast enhancing with normal to mildly reduced size, normal in shape. The gallbladder is filled by homogeneous hypoattenuating fluid material, normal. The intra- and extra-hepatic biliary tract are unremarkable.

REFERRING VET

Villasmil

There is a large and long anomalous shunting vessel that is emerging from the splenic vein and extending and feeding into the caudal vena cava vein at the level of the left diaphragm via the dilated phrenic vein. The portal vein cranial to the splenoportal confluence mildly decreases in size. The shunt vessel reaches a maximum diameter of approximately 0.6 to 0.8cm in diameter. The portal vein in the porta hepatis reaches a maximum diameter of approximately 0.6cm.

INVOICE

59743

The stomach is moderately distended, containing homogeneous hypoattenuating fluid material, heterogeneous ingesta and gas. Normal position.

DATE

8-16-23

The duodenum and small intestine are moderately dilated, loosely coiled, and contains a moderate amount of hypoattenuating fluid attenuating material and gas.

No evidence of mechanical gastrointestinal obstruction, or radiopaque foreign material.



PATIENT

Milo Allain

The wall of the descending colon is diffusely thickened and mildly irregular in contour. The colon is containing intraluminal gas with a minimal amount of fecal material.

The rectum contains a small amount of heterogeneous soft tissue attenuating fecal material.

SPECIES

Canine

The pancreas and mesentery are normal.

The spleen is homogenously soft tissue attenuating, and uniformly contrast enhancing, with normal size and shape.

BREED

Lhasa Apso

The renal silhouettes are normal in size, shape, contour, and attenuation pre- and post-contrast. The renal length is 4.7cm in the right kidney and 4.4cm in the left kidney. No radiopaque calculi are seen.

The ureters are normal in size with correct insertion in the trigone region.

SEX

Male Neutered

The urinary bladder is moderately filled, with the apex in the plane of L6, and is homogeneously soft tissue opaque. No evidence of radiopaque calculi.

The abdominal lymph nodes and adrenal glands are normal.

AGE

3 Years

The prostate is small and intrapelvic, normal for castrated patient.

The musculoskeletal structures are unremarkable.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large extra-hepatic portophrenic shunt with minimal microhepatia.
- Gastric and intestinal functional ileus. The differential diagnosis of abnormal gastric and intestinal distention, mild irregular descending colon wall contour and thickening. The differential diagnosis includes nonobstructive gastroenteritis and colitis, inflammatory, dietary indiscretion, or infectious.
- No evidence of mineral attenuating uroliths.
- Normal thorax.

HOSPITAL NAME

Mobile Pet Imaging

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Villasmil

The tomographic finding of the extra-hepatic portal shunt explains the history of liver enzyme elevation. The liver is almost normal in size, and the post shunting portal vein does not present severe diameter reduction. Gastric and gastrointestinal ileus can occur as a result of portosystemic shunt or be correlated to concurrent gastroenteritis. Surgical treatment is suggested. No mineral attenuated uroliths were seen.

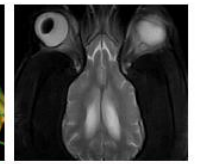
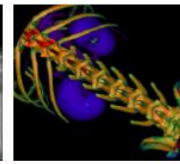
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A consult with a specialized center is recommended to discuss the best option for the surgical treatment.

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SPECIES

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SEX

Male Neutered

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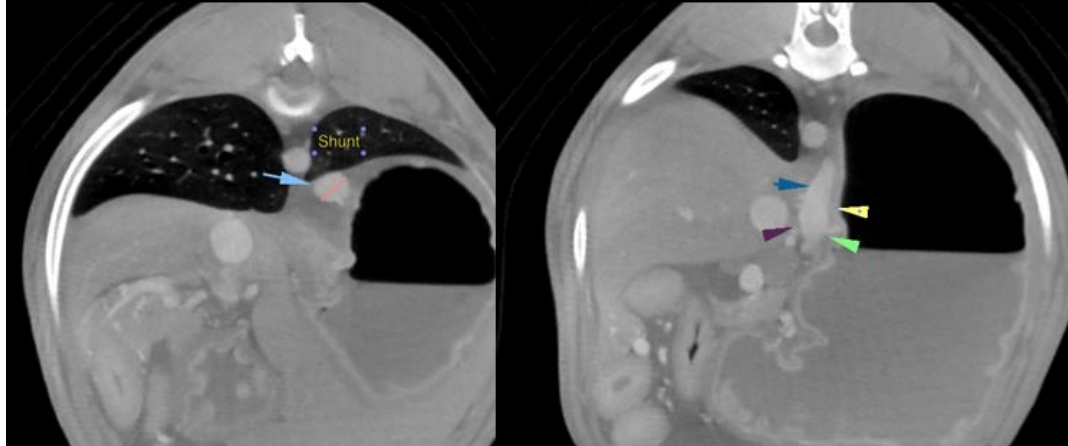
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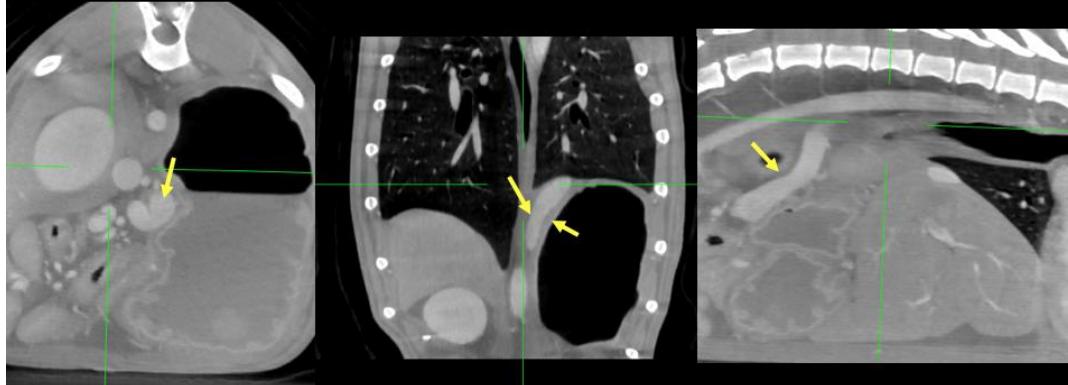
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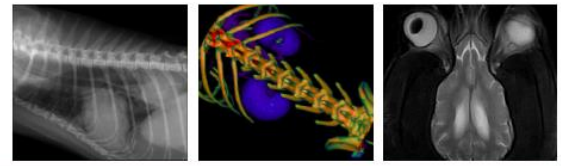
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Large extra-hepatic portophrenic shunt with minimal microhepatia



Large extra-hepatic portophrenic shunt with minimal microhepatia





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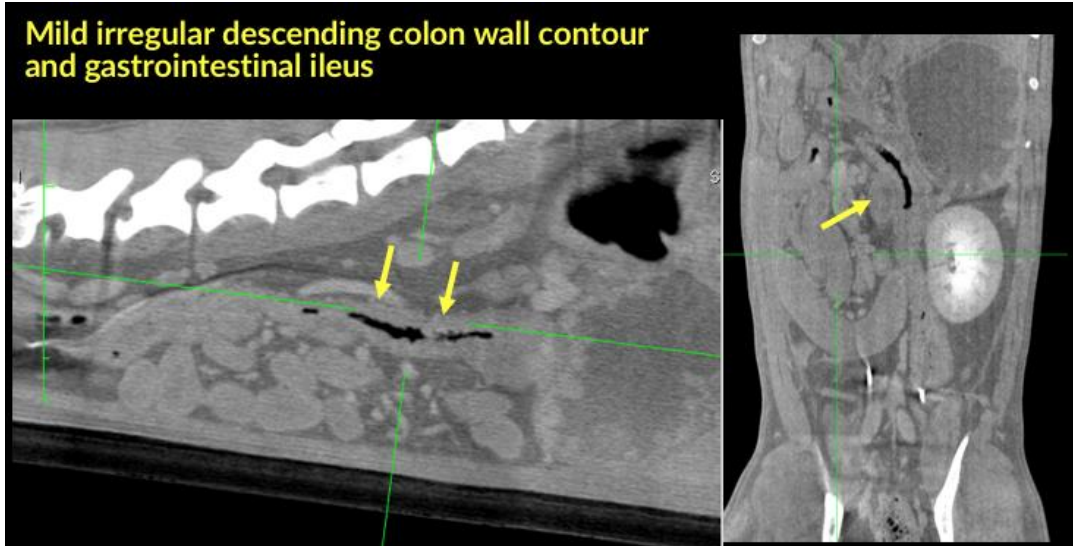
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Mild irregular descending colon wall contour and gastrointestinal ileus



Normal thorax



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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