



VETCT  
CONSULTANTS IN TELEMEDICINE

## IT'S YOUR CASE

Species: Canine

Breed: Labrador Retriever

Sex: Female Neutered

Age: 9 years

### Clinical History:

Acute onset lips smacking and hard swallowing, presumed nausea.

### Details of study and technical comments:

A radiographic study of the abdomen is presented for evaluation. The study consists of right lateral and ventrodorsal views of the abdomen.

### Diagnostic interpretation:

#### ABDOMEN:

There is good abdominal serosal contrast. The gastric silhouette contains air and heterogeneous ingesta; it is normal in position. The small intestine is generally soft tissue opaque or contains a small amount of air and within normal limits for diameter and margination. A cranioventral segment on the caudal lateral view has small irregular gas bubbles (orange arrows); this is resolved on the second lateral image. Faecal material and air is noted throughout the colon and rectum.

The visible margins of the liver and spleen are radiographically within normal limits. The renal and urinary bladder silhouettes are smoothly margined and within normal limits. Radiopaque calculi are not observed.

Spondylosis deformans is present at T12-T13 as well as left laterally at L2-L3 and L4-L5. Mild articular process joint remodelling is present at L1-L2 and L2-L3.

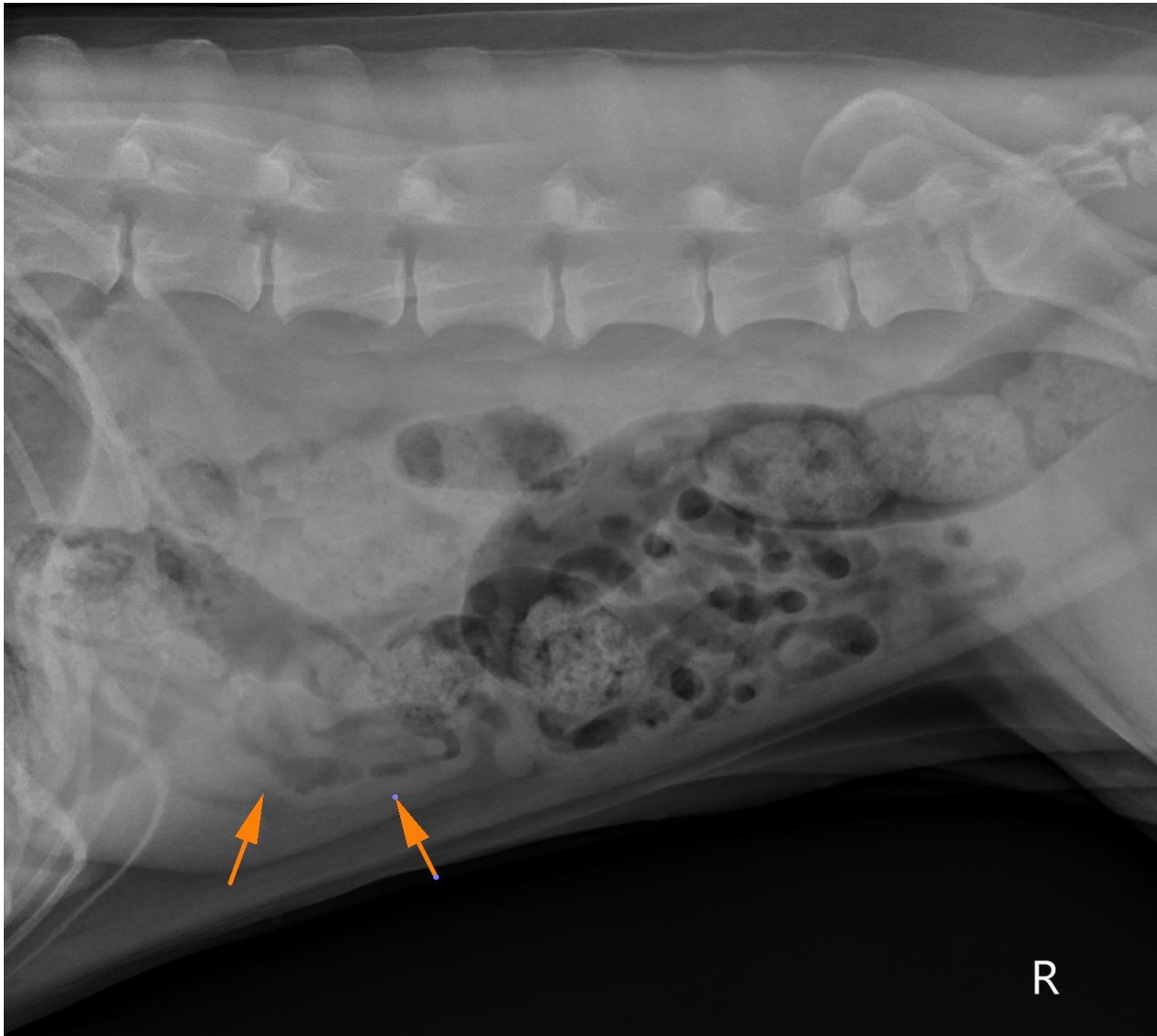


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This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It has been prepared specifically for interpretation by the currently licensed and registered veterinary surgeon responsible for the care of this patient.



**Conclusions:**

The abdomen is generally unremarkable. Gastric contents are presumed to represent normal ingesta.

Mild degenerative changes of the thoracolumbar vertebral column.

**Additional comments:**

A cause for the clinically suspected nausea is not observed in this study. Non specific gastroenteritis should be considered. If vomiting, diarrhea, or other signs referable to the abdomen are noted, consider recheck radiographs following fasting - ideally, a left lateral view could be performed to enable visualization of the pylorus.



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