



PATIENT PRESENTING CLINICAL SIGNS

Willie Nelson Craig History: Not eating for 3 days.
Abnormal PE/Chem/CBC/UA Results: Bloodwork: unremarkable

SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN

Feline The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity.

The bony structures are within normal limits.

BREED

DSH The abdominal detail is good; diaphragm and abdominal wall are intact.

The liver is located within the costal arch and the caudo-ventral lobe is pointed.

SEX

Neutered Male The abdominal detail in the left cranial abdomen is slightly reduced and the head of the spleen poorly outlined.

Foamy material is located in the stomach. Distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a small amount of fecal matter and gas.

AGE

6 Years Both renal shadows have a physiological size, shape and opacity; the surfaces are smooth. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

INTERPRETED BY The sublumbar region appears physiological.

RADIOGRAPHIC DIAGNOSIS

- Localized mild reduction in abdominal detail

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

St. Catharine's AH The radiographic changes are non-specific but may represent early steatitis or mesenteric inflammation due to pancreatic disease. In case fPLI has not been included in the blood biochemistry, it should be obtained. Inflammatory bowel disease may be present and abdominal ultrasound will help rule out intestinal tumors, lymphadenitis and biliary tract disease. Intestinal wall thickening may be present.

REFERRING VET

Dr. Boctor

INVOICE

20455

DATE

1/6/23



PATIENT

Willie Nelson Craig

SPECIES

Feline

BREED

DSH



SEX

Neutered Male

AGE

6 Years

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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INTERPRETED BY

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DipECVDI DVR

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