



PATIENT

Charlie Henriquez

PRESENTING CLINICAL SIGNS

P had vomiting and diarrhea last week P is doing fine now O just wants to make sure P is ok O has 4 more cats also O says P does a wheezing noise she has a video to show O thinks P may have asthma all of the cats had v/d but are ok now

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

1x lateral catogram, 1x lateral thorax, 1x lateral abdomen, 1x VD thorax and cranial abdomen

BREED

Domestic Short Hair

RADIOGRAPHIC FINDINGS

The body condition score is 8/9 with smooth alternating layers of fat and soft tissue opacity.

The bony structures appear physiological.

SEX

Neutered

Thorax

The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible. The bronchial tree is thin walled.

AGE

13 Years

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T6.

INTERPRETED BY

Heike Rudolf, DVM,
Dr. med. Vet.,
DipECVDDI DVR

The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. No chamber or outflow tract enlargement is evident.

Abdomen

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

HOSPITAL NAME

Animal Paradise
Hospital

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

The spleen appears physiological.

REFERRING VET

Dr. Kristen Hellwarth

The stomach is empty; the small intestinal loops have a physiological distribution and size. Colon and rectum contain a moderate amount of reasonably formed fecal matter.

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.

INVOICE

48943

The sublumbar region appears physiological

RADIOGRAPHIC DIAGNOSIS

DATE

12-10-21

- Obesity



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no changes that would explain the described clinical signs. However, bronchitis can be present without radiographic evidence and thus bronchoscopy with broncho-alveolar lavage is necessary to rule out infection and eosinophilic infiltrate should clinical signs reoccur or worsen. Obesity is known to worsen clinical signs of cough and impair lung function; weight control is strongly recommended. In case the diarrhea reoccurs or persist for a longer period of time, abdominal ultrasound is recommended to assess gastro-intestinal wall thickness and layering. Assessment of serum folate and cobalamin will also help finding the cause for vomiting and diarrhea.

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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