



**PATIENT**

Melvin Warnock

**PRESENTING CLINICAL SIGNS**

Straining in the litter box for 3 days, rest WNL

Abnormal PE/Chem/CBC/UA Results: mild azotemia, hematuria, rest WNL

**SPECIES**

Feline

**RADIOGRAPHS OF THE ABDOMEN**

RLR, LLR, VD

**BREED**

Domestic Shorthair

**RADIOGRAPHIC FINDINGS**

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

Ventral spondylosis is present at various sites. An increased opacity is evident in the LS intervertebral foramen.

**SEX**

Male Neuter

The abdominal detail is fair; diaphragm and abdominal wall are intact. One oval, partially mineralized entity is located in the ventral abdominal fat.

The liver is located within the costal arch and one caudo-ventral lobe is slightly rounded.

The spleen appears physiological.

**AGE**

15 Years

The stomach is empty; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a moderate amount of formed fecal matter which accumulates especially just cranial to the anus.

**INTERPRETED BY**

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

Both renal shadows are obscured by intestinal contents. The bladder is located in the abdominal cavity and contains a large amount of homogeneous fluid opacity.

The sublumbar region appears physiological.

**HOSPITAL NAME**

St. Catherine's Animal  
Hospital

**RADIOGRAPHIC DIAGNOSIS**

- Constipation
- Large bladder

Incidental findings:

- Possible discopathy LS junction
- Calcification of necrotic fat
- Spondylosis

**REFERRING VET**

Dr. Jui Gokhale

**INVOICE**

55833

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The combination of constipation and large urinary bladder suggests a spinal problem. However, the full bladder could be an incidental finding. Should the constipation not improve after evacuation of colon and rectum, a neurological examination may have to be followed by cross sectional imaging to rule out disc extrusion. Anus and perianal structures should be checked for inflammation and masses, proctoscopy is thus advised.

**DATE**

12-24-22



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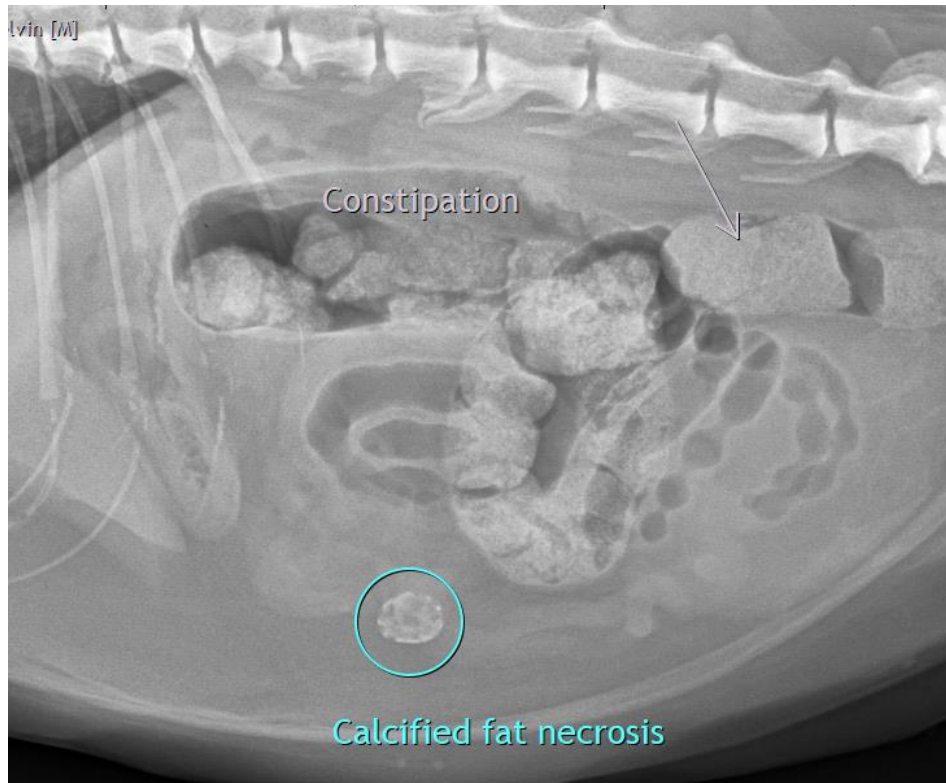
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Heike Rudorf, DVM, Dr. med. vet., DipECVDDI, DVR**  
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