



PATIENT PRESENTING CLINICAL SIGNS

Maurice Willis Not eating today. Lethargic. FIV positive Hyperthermia, temp. 39.8 No V/D/C Sneezing. Diagnosed with IBD, on Prednisone and Vit B12 injection. Echo done 7 weeks ago and indicate equivocal for HCM, IVS and LVFW measure upper end of normal, this might indicate early hypertrophic cardiomyopathy Vs age related change., recommend repeat Echo in one ear.
SPECIES Abnormal PE/Chem/CBC/UA Results: Blood work indicate increase in WBC and Neut, mild decrease in Lym, Mono and Eos, stress glucose, otherwise unremarkable. T4 normal. Lipase normal. U/A pending.
 Feline

BREED RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

DSH RLR, LLR, VD

RADIOGRAPHIC FINDINGS

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

AGE Rib 13 on the left does not enter a physiologically mineralized cartilage. Instead, an amorphous conglomerate of mineral opacities is present which appears as speckled, retroperitoneal mineralization on the lateral views. A moderate amount of ventral spondylosis is present at T11/12.

Thorax

INTERPRETED BY The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery.
 Heike Rudolf, DVM,
 Dr. med. Vet.,
 DipECVDI DVR

Fat is located cranial to the heart. The trachea diverges from the thoracic vertebrae and the carina is located at T5. The trachea runs parallel to the thoracic vertebrae and dips at the carina.

HOSPITAL NAME The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. A double cardiac outline on the VD view results in an enlarged cardiac silhouette and indistinguishable atria.
 St. Catherine's Animal Hospital

REFERRING VET Abdomen

DR. BEKHIT The abdominal detail is good.

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

INVOICE The spleen is not clearly visible.

47148 Stomach and small intestine contain gas. Colon and rectum contain a moderate amount of fluid and some fecal matter.

DATE 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 small amount of homogeneous fluid opacity.
 8-26-21



PATIENT The region of the sublumbar lymph nodes appears physiological.

Maurice Willis

RADIOGRAPHIC DIAGNOSIS

SPECIES

- Loss of costochondral junction rib 13 on left
- Gas in GIT

Feline

- Incidental finding
- Spondylosis

BREED

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DSH

The appearance of the left costochondral junction of T13 could be due to an infection or tumor, granuloma is less likely. Ultrasound of the last rib may help identify a location for sample taking. CT is the method of choice for examination of the bones.

SEX

Male Neuter

Gas in the GIT can be due to chronic aerophagia or gastro-enteritis.

The double cardiac outline is due to fat in the mediastinum.

AGE

13 Years

INTERPRETED BY

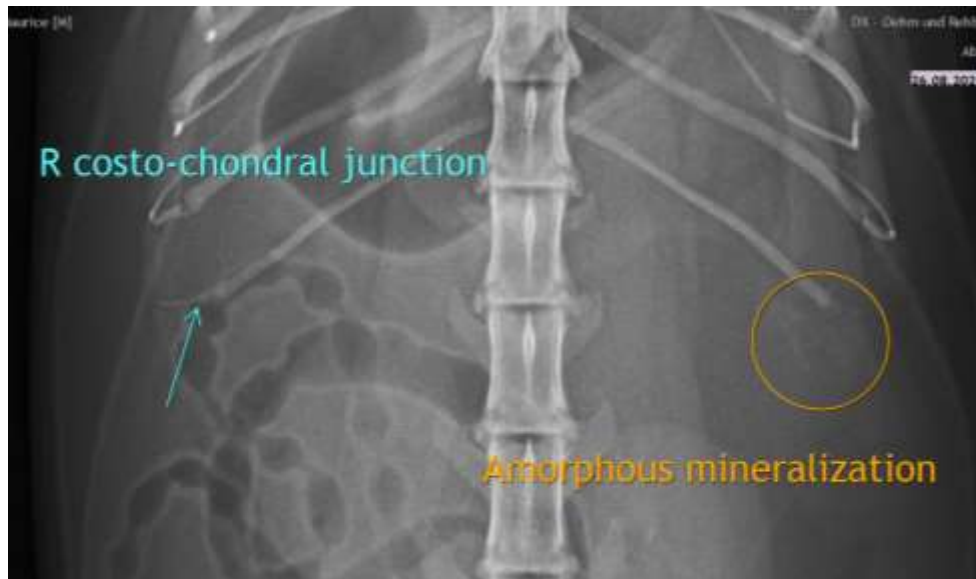
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HOSPITAL NAME

St. Catherine's Animal
Hospital

REFERRING VET

DR. BEKHIT



INVOICE

47148

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.

DATE

8-26-21

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., DipECVDI, DVR
Dr.H.Rudorf@gmail.com