



PATIENT

Ningy Vichareli

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

8Y

WEIGHT

12

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Jill Heatley DVM

HOSPITAL NAME

All Pets Medical
Center

REFERRING VET

Jill Heatley DVM

INVOICE

73891

DATE

2-23-26

PRESENTING CLINICAL SIGNS

- 2/21: Vomiting 3 days - saliva nda bile, also drooling. PE otherwise NAF, Animal BAR obese.
- CBC, Chem, SAA, Fpli WNL; U/A WBC, RBC, cocci. Bladder ultrasound WNL
- RX Convenia, Pratnel, fenbendazole, Cerenia, Liver adjunctive
- 2/23 Animal is now eating, no further vomitiing
- Radiographs appear to show small dense liver ,with rounded ventral lobe edge

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right lateral and ventrodorsal views of the abdomen totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

The stomach has normal postprandial appearance with rounded presentation of the gastric pylorus on the right lateral views (normal finding). No evidence of a foreign body or obstruction is seen.

The small intestines are normal in caliber with no evidence of dilation, plication, or abnormal content. No signs of obstruction are seen.

The colon is normal in appearance and content.

The overall size of the liver appears normal with regular and pointed margination. Parenchymal density appears uniform. No discrete mineralizations or masses are identified.

The kidneys are normal in size, shape, and position.

The mesenteric fat presents unremarkable.

The urinary bladder is moderately distended and unremarkable as well.

RADIOGRAPHIC DIAGNOSIS

- Normal radiographic presentation of the abdomen with no evidence of gastrointestinal ileus.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The stomach appears normal postprandially rendering an obstructive foreign body or hairball less likely. No acute abdominal abnormality is identified to explain the vomiting. Differential considerations include transient gastrointestinal upset such as due to hairball, dietary indiscretion, gastroenteritis, pancreatitis, as well as early hepatopathy, or other.

Monitoring of appetite and vomiting is recommended. Abdominal ultrasound should be considered if persistent signs develop.



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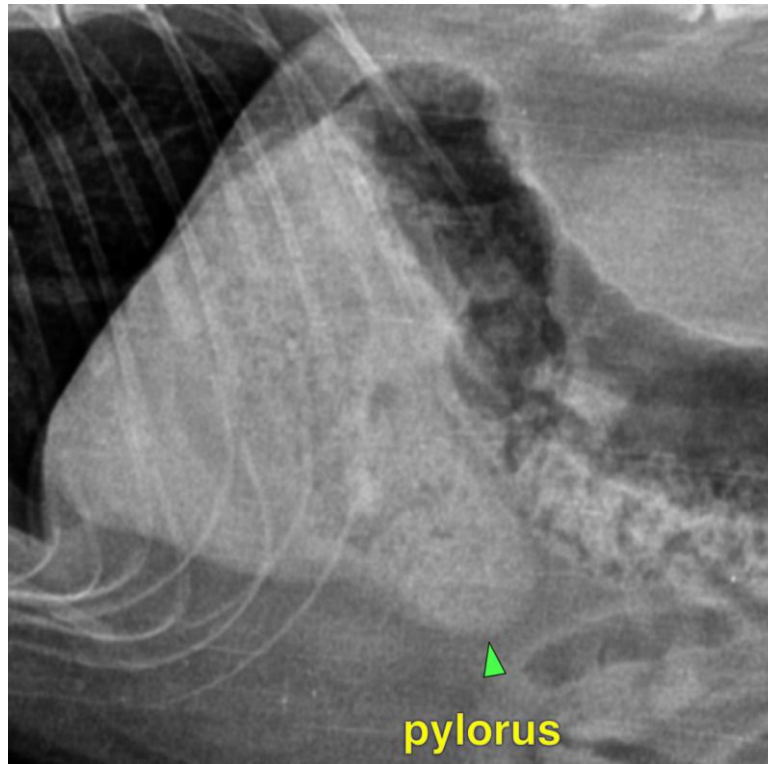
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
info@sonopath.com