



PATIENT PRESENTING CLINICAL SIGNS

Alice Watts Reason for Visit: vomiting History: completely indoor feline is here for vomiting for the past week, usually is found under the bed after the fact but did find 3 piles of vomit on rug today that seemed pretty fresh. owners stated about 10 days ago started offering pet temptations (about 5 daily) - owner is unsure if related to the vomiting for past week C/S/V/D: no c/s/d
SPECIES Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR, swatting, hissing, spitting EENT: No nasal discharge; clear no discharge OU; clean no exudate AU; No cough on tracheal palpation. Oral Cavity: scant dental tartar present, missing teeth Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. CV/Respiratory: No murmur or crackles/wheezing auscultated. Normal bronchovesicular sounds. Abd/GI: Soft abdomen Uro/Perineum: N Musculoskeletal: Ambulatory x4. BCS 7/9 Neurological: Appropriate Fecal: Diagnostic Testing Needed: bloodwork, abd rads, UA - qns Declined Diagnostics/Treatments: Findings: abd rads - kidney stones, retroperitoneal mass? L side - consult pending; bloodwork - Retic 12.8 (13.2-20.8), Eos 0.14 (0.17-1.57), K 3.2 (3.5-5.8) Assessment: vomiting r/o CKD, gastritis, dietary indiscretion, neoplasia

Feline

BREED

Ragdoll

SEX

SF

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right lateral and ventrodorsal views totaling 2 images available for review.

AGE

16 Years, 7 Months

RADIOGRAPHIC FINDINGS

The patient is obese.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Degenerative lumbosacral stenosis with spondylosis deformans is seen.

The surface of both kidneys is mildly irregular. Multiple mineral opaque foci superimpose with the renal diverticuli of both kidneys.

HOSPITAL NAME

DPC Veterininary Hospital

The stomach is post-prandial. An area of mildly reduced serosal detail is seen caudal to the stomach in the lateral view.

The small and large intestine present within normal radiographic limits. Moderate amounts of small intestinal gas are seen with no evidence of dilation of the bowel loops.

REFERRING VET

Dr. White

RADIOGRAPHIC DIAGNOSIS

- Area of reduced serosal detail caudal to the stomach.
- Small intestinal maldigestion pattern.
- Chronic bilateral hypercalcemic nephropathy.
- Degenerative lumbosacral stenosis.

INVOICE

51490

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The area of reduced serosal detail caudal to the stomach may represent summation artifact; however, pancreatopathy is one potential consideration.

DATE

4-12-22

Consider potential for enteropathy with functional ileus. Abdominal ultrasound would be a reasonable next step in the further definition of this case should the clinical signs persist.



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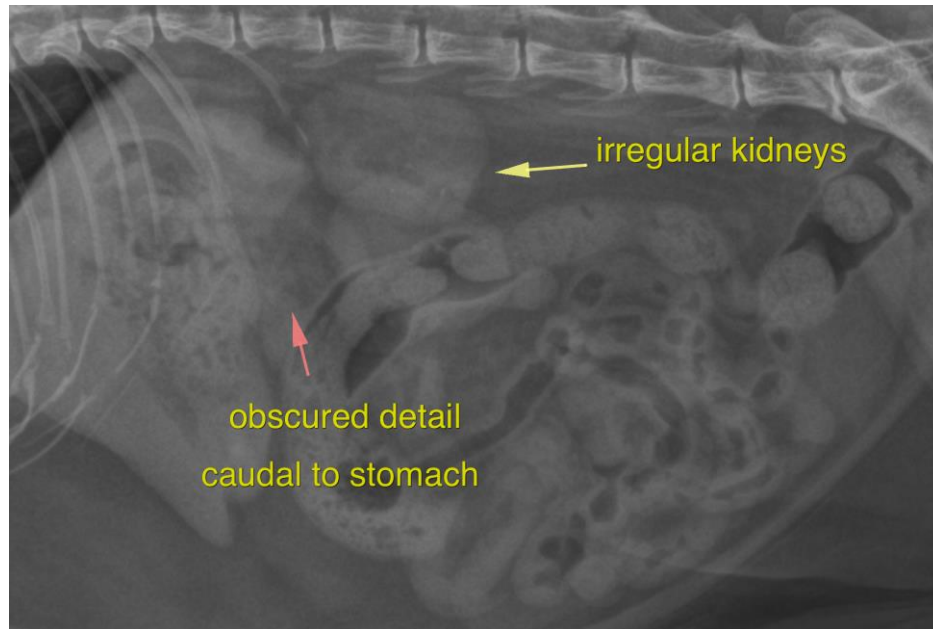
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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