

**PATIENT**

Pancake Homer

**PRESENTING CLINICAL SIGNS**

Diarrhea & inappetence since Sunday, has a history of hyperthyroidism & renal failure  
Abnormal PE/Chem/CBC/UA Results: BW- mild basophilia, rest is WNL

**SPECIES**

Feline

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Single right lateral view of the abdomen available for review.

**BREED**

DSH

**RADIOGRAPHIC FINDINGS**

A mineral opacity is seen in the caudal abdomen cranial to the urinary bladder superimposed onto the gastrointestinal tract.

**SEX**

Female Spayed

The colon appears to be mostly empty which confirms the history of prior diarrhea. The wall of the distal descending colon cranial to the pelvic inlet appears to be relatively thick.

The radiographic presentation of the kidneys and urinary bladder is within normal limits.

The liver presents within normal limits.

**AGE**

10 Years

**RADIOGRAPHIC DIAGNOSIS**

- Intestinal maldigestion pattern – otherwise normal radiographic presentation of the abdomen.
- Potential for increase wall thickness of the prepelvic descending colon.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic findings are compatible with the history of diarrhea. Functional ileus is a potential underlying cause of the radiographic presentation of the gastrointestinal tract. Consider abdominal ultrasound for further definition in order to gain more detailed information about the gastrointestinal tract's wall and motility as well as other associated changes in case of persisting clinical signs.

**HOSPITAL NAME**

St. Catharine's Animal  
Hospital

**REFERRING VET**

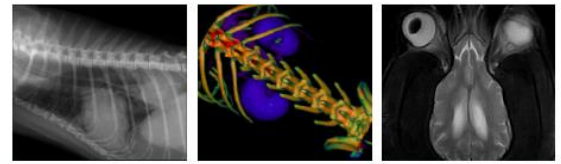
Dr. Jui Gokhale

**INVOICE**

53102

**DATE**

7-26-22



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Pancake Homer

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DSH

**SEX**

Female Spayed

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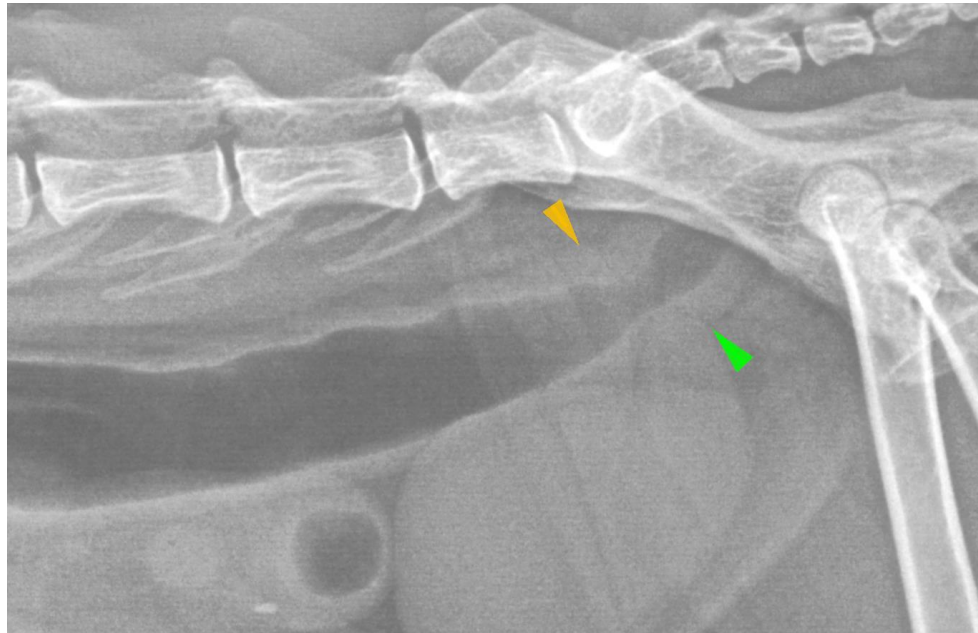
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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