



**PATIENT**

Ouija Beety

**PRESENTING CLINICAL SIGNS**

Unthrifty/ weight loss/  
Abnormal PE/Chem/CBC/UA Results: Pending

**SPECIES**

Feline

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

A lateral view of the abdomen is provided for review.

**BREED**

Domestic Shorthair

**RADIOGRAPHIC FINDINGS**

The body condition score is 3/9.

Multifocal mild spondylosis formation is seen along the lumbar spine.

**SEX**

Female/sp

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is lost, due to lack of peritoneal fat.

**AGE**

4

The liver is appropriate in position, size and presents uniform opacity.

No radiopaque calculi are noted throughout the upper and lower urinary tract.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated and contain a mild amount of gas. The small intestinal loops appear tubular and rigid with a prominent wall.

The colon contains a small amount of gas.

**HOSPITAL NAME**

New Bridge  
Veterinary Practice

**RADIOGRAPHIC DIAGNOSIS**

- Emaciation
- Possible mural thickening of the small intestinal tract
- Spondylosis deformans

**REFERRING VET**

Dr. Abina Glennon

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study is fitting the history of weight loss, with secondary lack of peritoneal fat, decreasing the serosal detail. The small intestinal loops appear rigid with possible prominent wall concerning for diffuse inflammatory changes or neoplastic transformation. Complementing workup by an abdominal ultrasound examination appears beneficial for further evaluation of the abdominal organs and rule in/out mural changes of the intestinal tract.

**INVOICE**

49271

**DATE**

1-3-22



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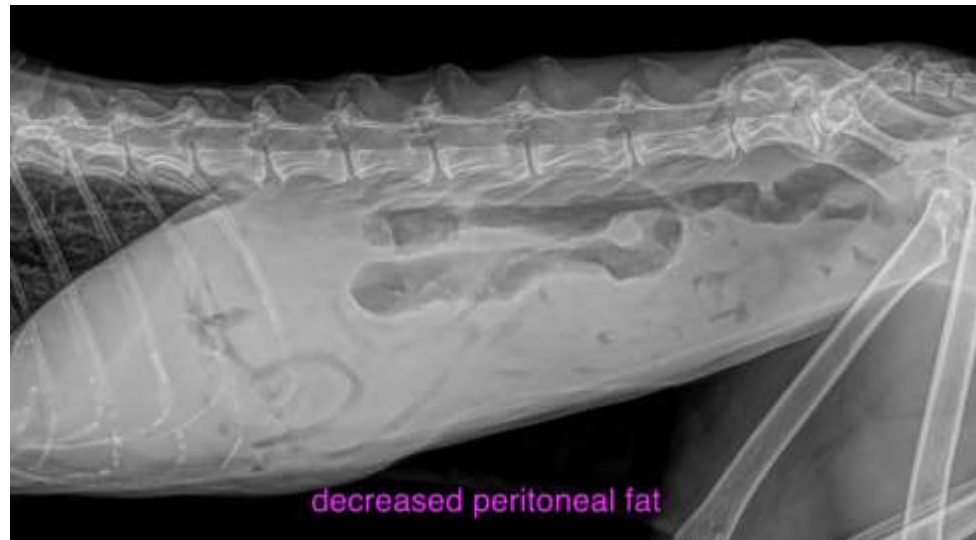
Dr. Abina Glennon

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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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com