



PATIENT

Vybz Ferneyhough

PRESENTING CLINICAL SIGNS

3 days history of inappetence and vomiting
Abnormal PE/Chem/CBC/UA Results: elevated BUN, CREA, PH and WBC reduced K

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ABDOMEN

Radiographs of the abdomen in three imaging planes are provided for review.

BREED

Boxer Mix

RADIOGRAPHIC FINDINGS

The vertebral endplates T12/T13 present moderate spondylosis formation.

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

SEX

Male

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

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

AGE

7 Years

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

In the pyloric region of the stomach, soft tissue material with a heterogeneous gas pattern is visible.

HOSPITAL NAME

St. Catherine's Animal
Hospital

In the left cranial abdomen, there are multiple small intestinal segments, soft tissue material with a gas opaque striation. The respective intestinal segments are moderately distended, resulting in two populations of small intestinal loops.

The colon is empty.

REFERRING VET

Dr. Boctor

RADIOGRAPHIC DIAGNOSIS

- Suspect small intestinal mechanical obstruction with potential retained gastric foreign material
- Spondylosis deformans

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the history of inappetence and vomiting and the striated material throughout multiple small intestinal segments, the radiographic study is highly suggestive for small intestinal mechanical obstruction possibly due to fabric foreign material. Due to the delay and prior to surgical intervention, a follow up radiograph should be considered to recheck if the pattern is stationary or if the material has been propelled through the intestinal tract.

DATE

1-4-22



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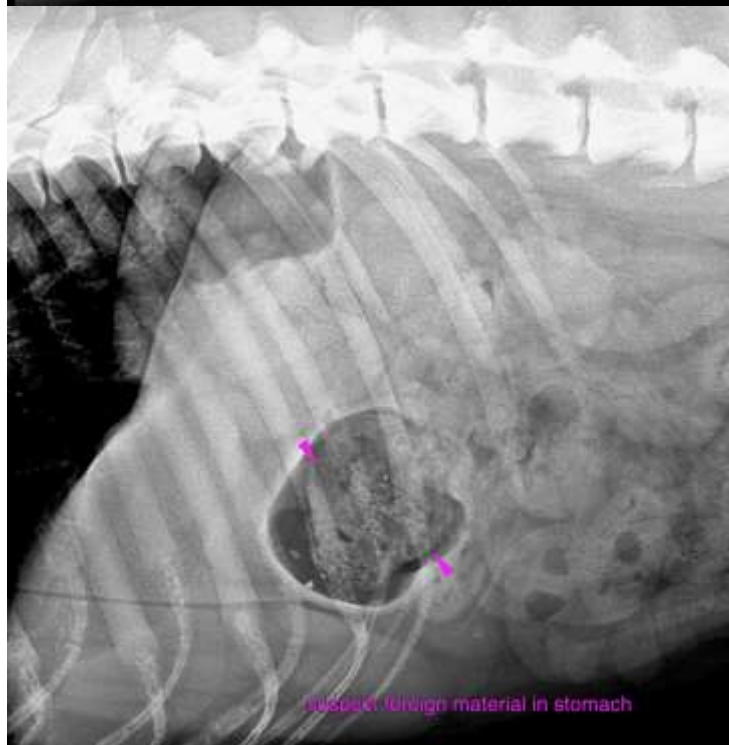
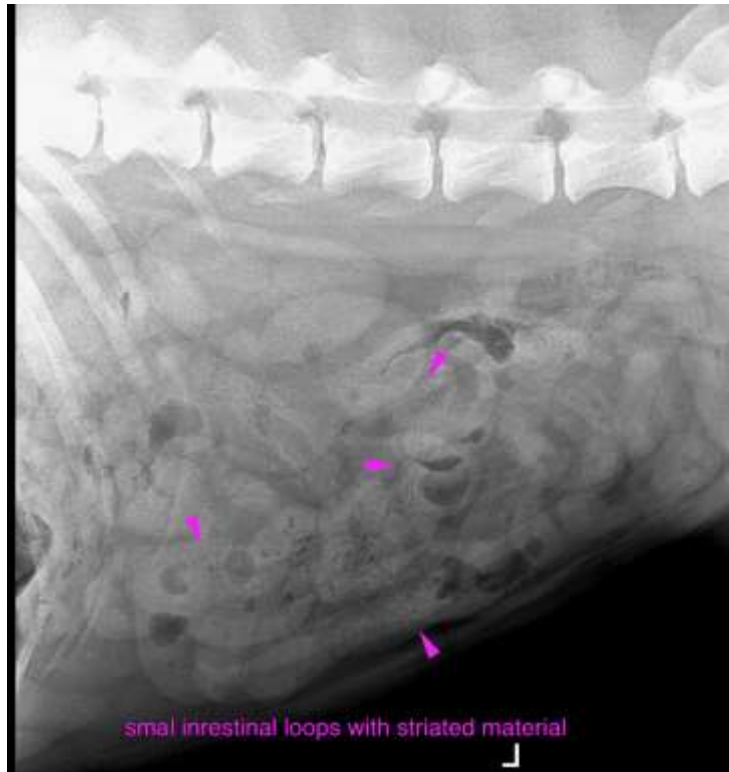
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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