

**PATIENT**

Thumper Pazer

**PRESENTING CLINICAL SIGNS**

Hx of fx pelvis. Trouble defecating. On lactulose 0.5cc po bid  
Abnormal PE/Chem/CBC/UA Results: none

**SPECIES**

Feline

**COMPUTED TOMOGRAPHY OF THE PELVIS**

A high resolution pre- and post-contrast CT study of the pelvis is provided for review.

**BREED**

DSH

**COMPUTED TOMOGRAPHIC FINDINGS**

Multiple chronic fractures with rounded and sclerotic margins of the pelvic floor are visible. The left hemipelvis is displaced cranially and the left iliac wing is in contact with the left transverse process of L7. There is marked medial deviation axial of the left hemipelvis into the pelvic canal; causing significant narrowing of the pelvic canal. The rectum is compressed by the mass effect of the left hemipelvis. The descending colon is moderately distended by fecal material.

**SEX**

F

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- History of multiple pelvic fractures left hemipelvis and pelvic floor and left sided cranial luxation of the iliosacral joint
- Stenosis of the pelvic canal due to marked medial axial deviation of the left iliac wing – including the acetabulum
- Evidence of constipation

**AGE**

6 Months

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The medial axial deviation of the left iliac wing into the pelvic canal causes stenosis of the pelvic canal with subsequent constipation. Due to the young age of the patient, surgical options should be discussed with orthopedic surgeon – such as correction osteotomy to move the caudal segment (including the acetabulum) or hemipelvectomy.

**HOSPITAL NAME**

Stone Cottage  
Veterinary Hospital

**REFERRING VET**

Spaccaralli

**INVOICE**

48912

**DATE**

12-8-21



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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.

**BREED**

DSH

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

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