



PATIENT

Arlo Chance

PRESENTING CLINICAL SIGNS

Ate part of a plastic tree. Has been vomiting up watery blood. Hasnt been wanting to eat or drink this morning.

Abnormal PE/Chem/CBC/UA Results: PE: Mucous Membranes MILDLY TACKY, MILD DEHYDRATION No masses. Full healthy hair coat. NO RECENT LABS

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE ABDOMEN

Radiographs of the abdomen in two orthogonal imaging planes are provide for review.

BREED

Domestic Short Hair

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

SEX

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

Neutered Male

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

AGE

7 Years, 6 Months

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

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.

HOSPITAL NAME

Elizabeth Animal
Hospital

The stomach is in its anticipated position and contains a mild amount of fluid and gas.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

The colon is seen in the expected position and presents with appropriate content.

REFERRING VET

Leon Anderson, DVM

RADIOGRAPHIC DIAGNOSIS

- Mildly gas und fluid distended stomach

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

50434

The gas and fluid filled stomach can be a sequela to functional (considered more likely) or mechanical gastric emptying disorder. No radiopaque foreign material is appreciated. Consider empirical management for potential underlying gastritis. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination.

DATE

2-18-22



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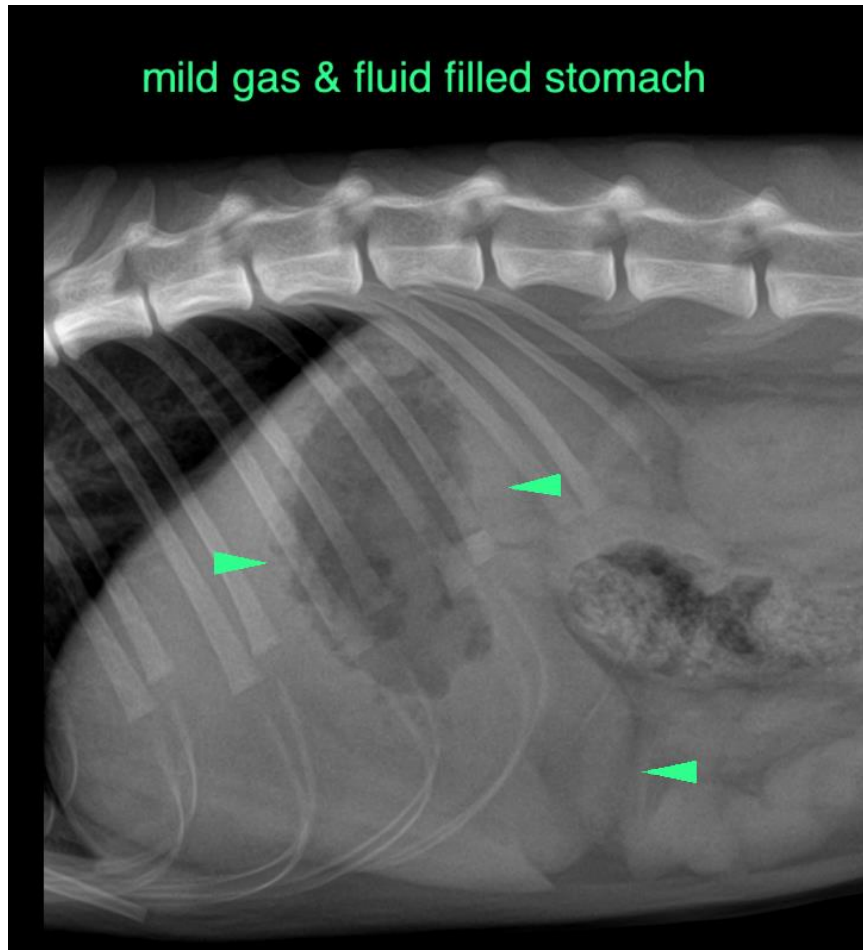
Leon Anderson, DVM

INVOICE

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DATE

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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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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