



PATIENT PRESENTING CLINICAL SIGNS

Henry Svoltk Reason for Visit: Vomiting History: 3yr 11m old NM DSH presented today for vomiting. Owner says P has been vomiting for the past 48hours - has now been fasted for 24 hours. P cannot seem to hold down his food, despite still wanting to eat. P had similar problem back in May 2022 - abd US and radiographs done. P responds well to cerenia and famotidine. Owner had some famotidine at home but did not try giving it because P could not hold down his water Since 5/2022 will vomit occasionally, no hairballs. No diarrhea.

SPECIES

Feline

BREED

DSH

Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: 4-6% dehydrated EENT: N Oral Cavity: mm pink tacky, no string under tongue Lymph Nodes: N Skin: No skin tent CV/Respiratory: N Abd/GI: Not painful, no palpable FB Uro/Perineum: N Musculoskeletal: N Neurological: N

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

SEX

NM

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

AGE

4 Years

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

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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

DPC Veterinary Hospital

The stomach is in its anticipated position and is empty.

In the caudoventral abdomen, a segmentally mild dilated small intestinal loop is appreciated.

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

REFERRING VET

Dr. Feldt

RADIOGRAPHIC DIAGNOSIS

- Segmentally mild dilated small intestinal loop

INVOICE

56824

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The segmental mild dilation of a small intestinal loop can be the result of segmental relaxation during normal peristalsis of the small intestinal loop. Theoretically a foreign body such as hair bezoar is a consideration, but there is no evidence of an abnormal gas pattern suggestive for structured material. If clinical signs are refractory to therapy, recommend follow up radiographs or a complete abdominal ultrasound examination.

DATE

2-18-23



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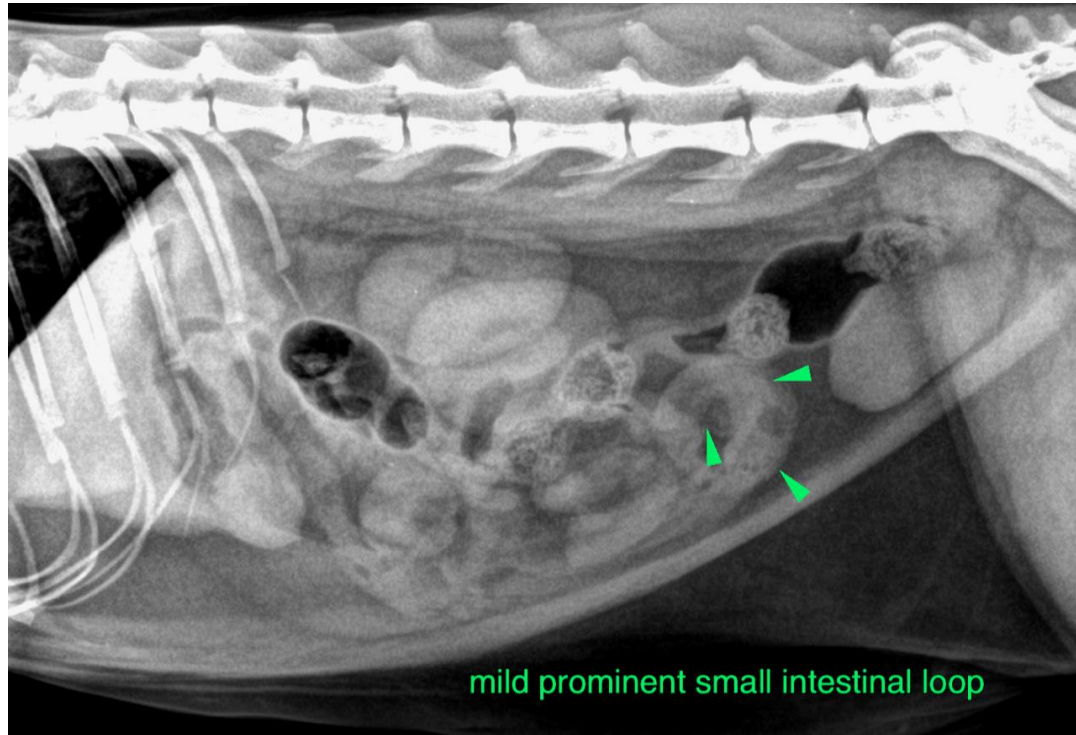
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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