



PATIENT PRESENTING CLINICAL SIGNS

Vinnie Glover
 Losing weight (was 3.2 kg now 2.77kg), vomiting, and having diarrhea. Eating and drinking is normal and he had a normal temperature. Urination is normal as well. No sneezing or coughing. Previously was diagnosed as : The radiographic findings are suggestive for hiatal hernia with intermittent or permanent malpositioning of the lower esophageal sphincter cranial of the diaphragmatic crura. Esophageal foreign material or mediastinal mass are possible but less likely differential diagnoses. any changes.

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered Male

AGE

11 Years

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME

Dr. Wilson Road
 Veterinary Clinic

REFERRING VET

Dr. Yessa

INVOICE

56876

DATE

2-21-23

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.
 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.
 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 volume of the left kidney is moderately decreased, the margins are mildly irregular and small mineralization are seen in the imaging plane of the left renal pelvis. At the caudomedial aspect of the left kidney, a small (suspect < 2mm) mineral opaque body is seen The right kidney is normal in size and shape. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

The stomach is in its anticipated position and presents normal content.
 The small intestinal loops appear generalized mildly prominent and tubular.
 The colon is seen in the expected position and presents with appropriate content.

In the pictured parts of the thorax, an irregular roundish soft tissue opacification of the lung field is seen – in the VD view there appears to be a roundish soft tissue opacity in the caudomedial aspect of the left caudal lung lobe.

RADIOGRAPHIC DIAGNOSIS

- Left sided chronic nephropathy with nephrolithiasis
- Possible left sided ureterolith
- Subjective prominent small intestinal loops
- Soft tissue mass caudodorsal lung field

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The prominent small intestinal loops are a subjective impression, to rule in/out diffuse mural changes (e.g. inflammatory, neoplastic), an abdominal ultrasound examination is warranted.
 There is a soft tissue opacification of the caudodorsal lung field, the finding is concerning for



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primary pulmonary neoplasia (e.g. carcinoma) or a zone with pneumonia.

Consider full renal staging to check for underlying renal disease as cause for the weight loss. An ultrasound examination can be used to confirm ureterolith and check for mechanical obstruction.

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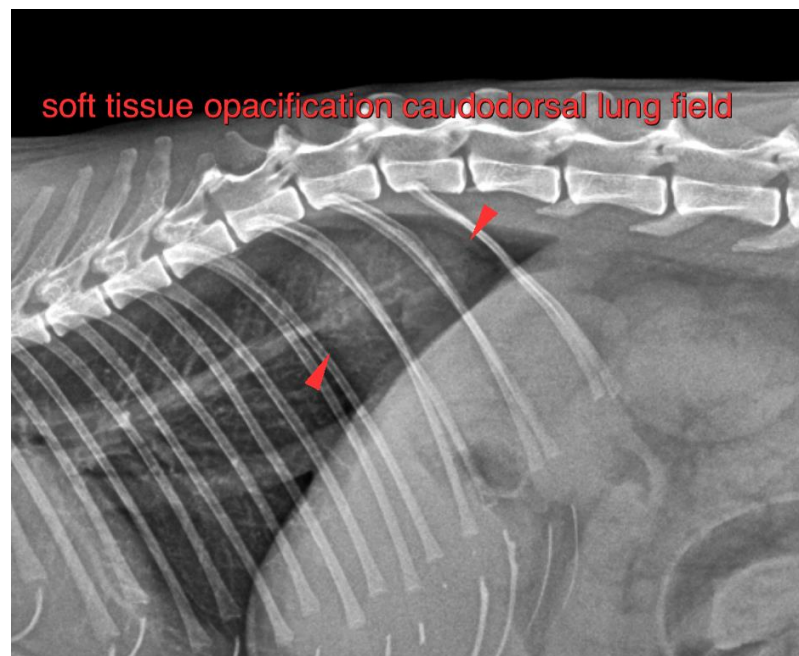
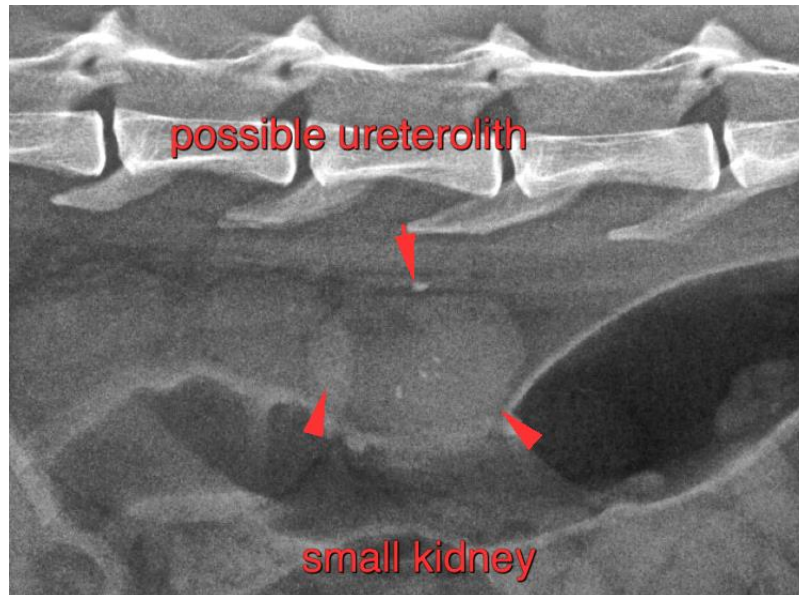
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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