



PATIENT

Tobie Skeen

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15Y

WEIGHT

10.8

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Technician

HOSPITAL NAME

Northshore Veterinary
Hospital

REFERRING VET

Brita Kiffney

INVOICE

73637

DATE

2-5-26

PRESENTING CLINICAL SIGNS

- Formerly feral, owner captured over 10 years ago, has had all teeth removed due to disease, arthritis in the right elbow and spinal changes, radiographic changes consistent with asthma but not coughing.
- Exam : glossy hair coat, no teeth, thorax normal, no cough,

Abnormal PE/Chem/CBC/UA Results: pending

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

A complete set of radiographs of the thorax and abdomen are provided for review.

RADIOGRAPHIC FINDINGS

Thorax

Along the thoracic spine, multifocal spondylosis formation is seen.

The extrathoracic soft tissues present homogeneous without abnormalities.

The cardiac silhouette is rotated, presenting broad contact with the sternum. The heart is of normal size and shape; there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

Generalized mild increased visibility of the bronchial wall is appreciated.

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels. In the VD view, the right cranial presents a decreased volume with secondary mediastinal shift to the right, and generalized ground glass opacity – considered as dystelectasis.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

Abdomen

The vertebral endplates T13/L1 present bridging spondylosis formation.

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. A roundish mineral opaque body is superimposed on the liver – in the region of the gallbladder.

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.

Both kidneys are seen and present with normal size, shape, delineation and opacity. A small amount of mineral opaque material is seen in the image plane of the left renal pelvis. The urinary bladder is in its anticipated position and significantly distended. No radiopaque calculi are noted throughout the lower urinary tract.

The stomach is in its anticipated position and presents normal content.



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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.

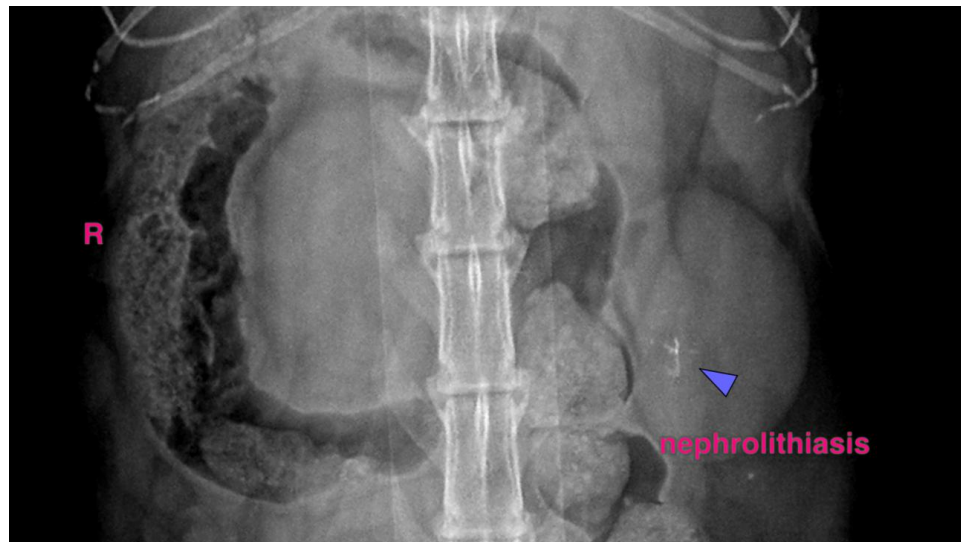
RADIOGRAPHIC DIAGNOSIS

- Mild bronchial pattern without air-trapping
- Significantly distended urinary bladder
- Suspect cholecystolithiasis
- Left sided nephrolithiasis
- Spondylosis deformans

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bronchial lung pattern can be accentuated by age related changes – feline bronchial disease is a likely differential.

Given the significant dilation of the urinary bladder, check for normal micturition.





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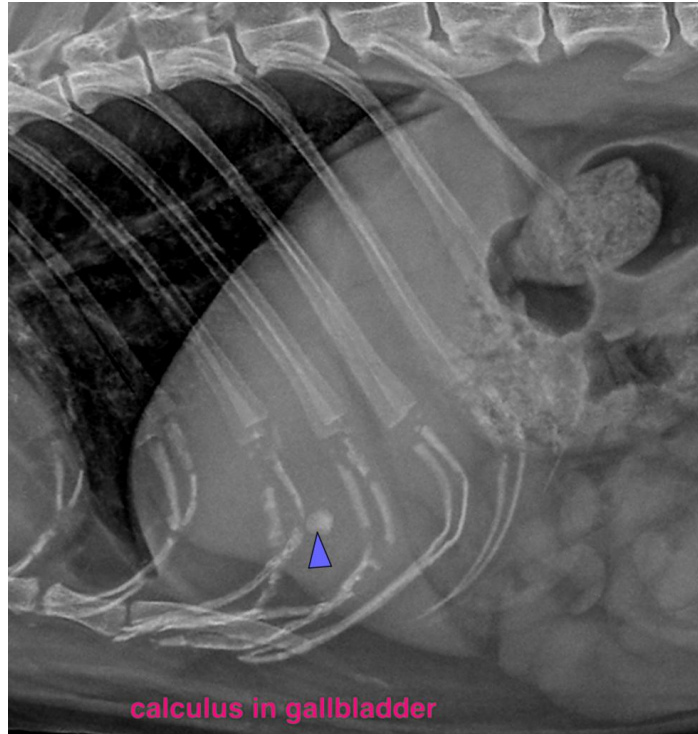
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com