



PATIENT

Red Worthington

PRESENTING CLINICAL SIGNS

losing weight, not eating no c/s/v/d O: BAR, m.m-pale pink, possibly mildly Icteric, H- 84, L-tachypnea and panting sometimes, Abdo, U/G, skin and coat- Flea dirt ++, BC 2/9, both descended testicles FPL- Normal FIV/FELV test- Negative

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: CBC- HCT 12.8, HGB 4.4, RBCs 3.4, PLT 33 Diag- BUN 32.8, Cre 0.5, PHos 6.6, Ca 7.9, TP 9.2, Glob 6.9, Glu 65, TBIL 2.6, K 3.3

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

BREED

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

Domestic Short Hair

RADIOGRAPHIC FINDINGS

The body condition score is 2/9.

SEX

Male

Thorax

The surrounding bony structures are within normal limits.

AGE

6 Months

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

The volume of the left cranial lung lobe is moderately decreased, and the left cranial lung lobe is consolidated with air-bronchograms. A midline shift of the heart to the left is seen. The remainder of the lung parenchyma are aerated and present the expected architecture.

HOSPITAL NAME

Animal Paradise
Hospital

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

Abdomen

The surrounding bony structures are within normal limits.

REFERRING VET

Dr. Mostafa Elshafie

Despite the nutritional status, the abdominal volume is mild to moderately increased. The serosal detail is lost and there is a homogeneous soft tissue opacification with interspersed gas filled intestinal loops throughout the abdominal cavity, effacing the margins of the abdominal organs. In the craniodorsal abdomen, ventral to L1 to L3, a zone with homogeneous soft tissue opacification and without interspersed small intestinal loops is seen, the colon in the cranial abdominal is in a relative ventral position and the small intestinal loops appear to be displaced caudally.

INVOICE

50139

DATE

2-7-22



PATIENT

Red Worthington

RADIOGRAPHIC DIAGNOSIS

- Emaciation
- Peritoneal effusion
- Possible craniodorsal abdominal mass

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- Compression atelectasis left cranial lung lobe

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the young age of the patient in combination with the peritoneal effusion, rule out underlying feline infectious peritonitis or round cell tumor. The suspected craniodorsal abdominal mass effect can be caused by enlarged kidneys, lymph node or cyst. Complementing workup by an abdominal ultrasound examination would be ideal, including tapping of the peritoneal effusion.

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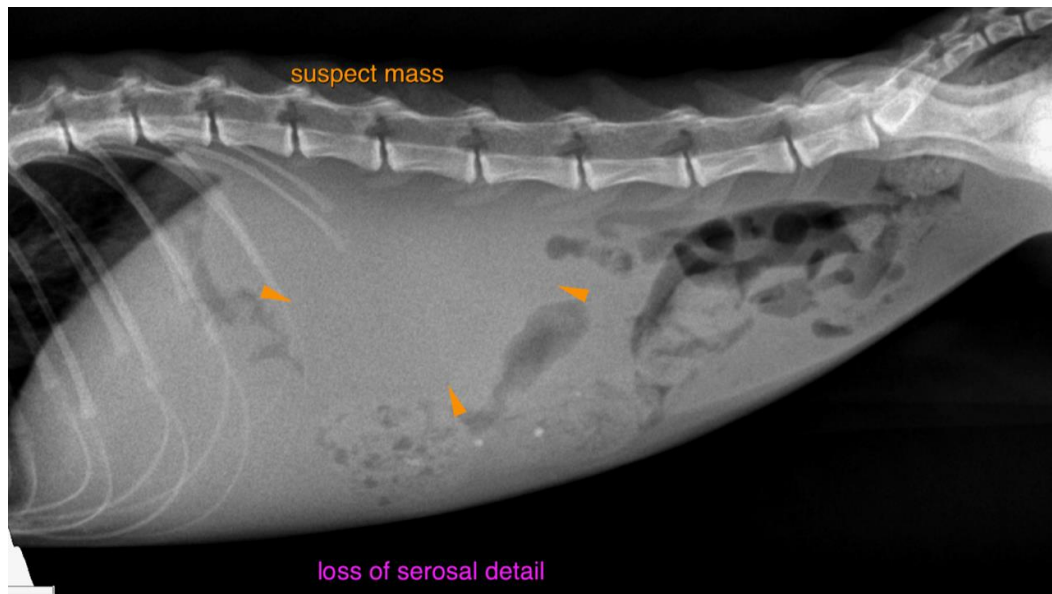
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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