



PATIENT PRESENTING CLINICAL SIGNS

Skinny Senger pet is here for lethargic, pet is not eating or drinking in 24 hours. owner states no vomiting noted. Abnormal PE/Chem/CBC/UA Results: Physical Examination Key -- (N= Normal, A= Abnormal) Hydration: ~9% dehydrated Mentation: QDR EENT: No nasal discharge; clear no discharge OU; clean no exudate AU; No cough on tracheal palpation. Oral Cavity: mod dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. CV/Respiratory: grade 4/6 murmur, no crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly Uro/Perineum: N, large soft bladder Musculoskeletal: Weakly ambulatory x4. BCS 5/9 Neurological: Appropriate

SPECIES

Feline

BREED

DSH

RADIOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

An overview study including the thorax and abdomen in two orthogonal imaging planes is provided for review.

SEX

NM

RADIOGRAPHIC FINDINGS

Thorax

The intervertebral disc space T1/T2 is moderately narrowed.

11 Years, 1 Month

Level with the 6th intercostal space, a heterogeneous mineral opaque lesion is superimposed on the cardiac silhouette - not appreciated in the VD view.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

DPC Veterinary Hospital

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

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

REFERRING VET

Dr. White

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

INVOICE

50639

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

Abdomen

DATE

3-1-22

Both coxofemoral joints present advanced osteophyte new bone formation. The acetabular groove is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim.

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



PATIENT

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

Skinny Senger

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

The spleen is not appreciated.

SPECIES

Feline

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.

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The stomach is in its anticipated position and contains a mild to moderate 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.

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

AGE

11 Years, 1 Month

RADIOGRAPHIC DIAGNOSIS

- Mild gas and fluid distended stomach
- Suspect subcutaneous dystrophic mineralization thoracic wall
- Advanced degenerative osteoarthritis coxofemoral joints bilaterally, due to hip dysplasia
- Discopathy T1/T2

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gas and fluid distended stomach is suggestive for functional gastric emptying disorder – a primary underlying cause is not appreciated in the current radiographic study. If not done so yet, recommend complementing workup by complete blood work including fpl. An abdominal ultrasound examination might be beneficial as well for further assessment of the abdominal organs and to rule out high ileus completely.

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Skinny Senger

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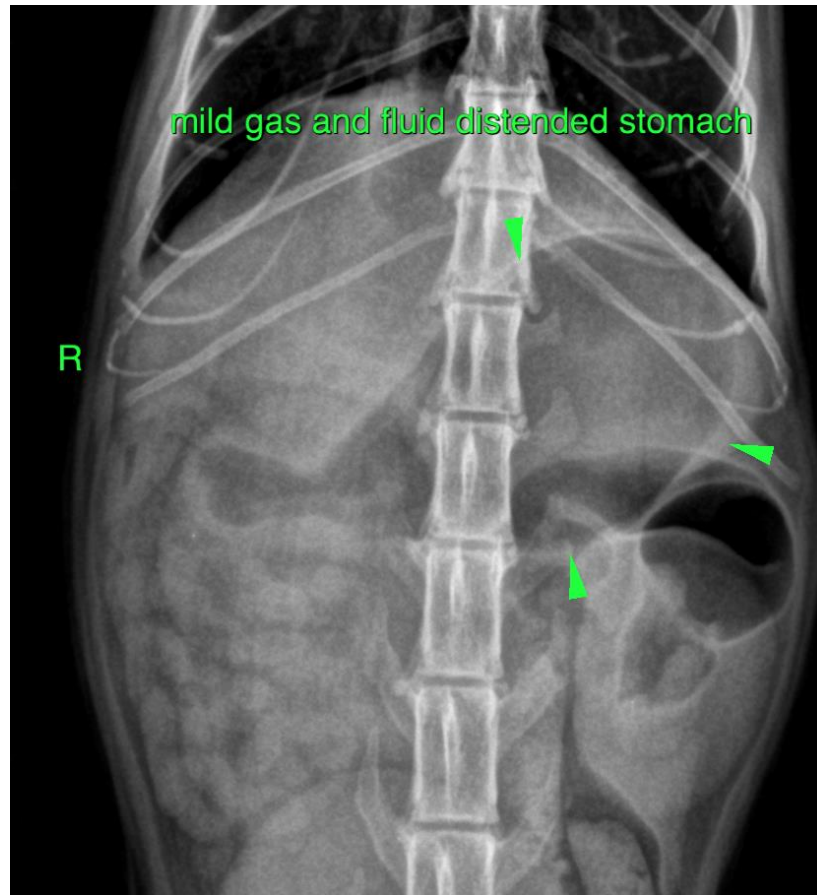
Dr. White

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mild gas and fluid distended stomach

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suspect subcutaneous dystrophic mineralization



PATIENT

Skinny Senger

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.

SPECIES

Feline

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.

BREED

DSH

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