



PATIENT PRESENTING CLINICAL SIGNS

Doug Stephenson Grade 2 heart murmur. Upon abdominal palpation, was uncomfortable, also felt possible flatulence. Eating and drinking well as per the owner, but owner is concerned as he meows excessively after eating . Need to rule out any abnormalities as there is radio-opaque area on cranial side of heart

SPECIES RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

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

RADIOGRAPHIC FINDINGS

BREED Thorax

Domestic Shorthair The surrounding bony structures are within normal limits.

SEX The extrathoracic soft tissues present homogeneous without abnormalities.
Neutered Male 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.

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

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

INTERPRETED BY In the lateral projections, the cranioventral lung field, has a mild increased radiopacity. The remainder of the lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

HOSPITAL NAME Abdomen

Truscott Animal Hospital Multifocal spondylosis formation is seen along the caudal lumbar spine.

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.

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

Dr. Medhat Meawad The splenic head is in the anticipated position and within normal limits for size and opacity.

INVOICE Both kidneys are seen and present with normal size, shape, delineation and opacity. Ovoid shaped faint mineralized structures are superimposed on the cranial pole of the kidneys bilaterally. 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 presents normal content.

DATE 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.

3-18-23 The colon is seen in the expected position and presents with appropriate content.



PATIENT RADIOGRAPHIC DIAGNOSIS

Doug Stephenson

- Mild obesity
- Increased radiopacity cranioventral lung field
- Suspect bilateral adrenal mineralization - incidental
- Spondylosis deformans

SPECIES

Feline

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax and abdomen presents without clinically relevant abnormalities.

BREED

Domestic Shorthair

The increased radiopacity of the cranioventral lung field is considered as a sequela to the mild obesity of the patient and supposed fat depositions in the cranial mediastinum.

SEX

Neutered Male

AGE

17 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Truscott Animal
Hospital

REFERRING VET

Dr. Medhat Meawad

INVOICE

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3-18-23





PATIENT

Doug Stephenson

SPECIES

Feline

BREED

Domestic Shorthair

SEX

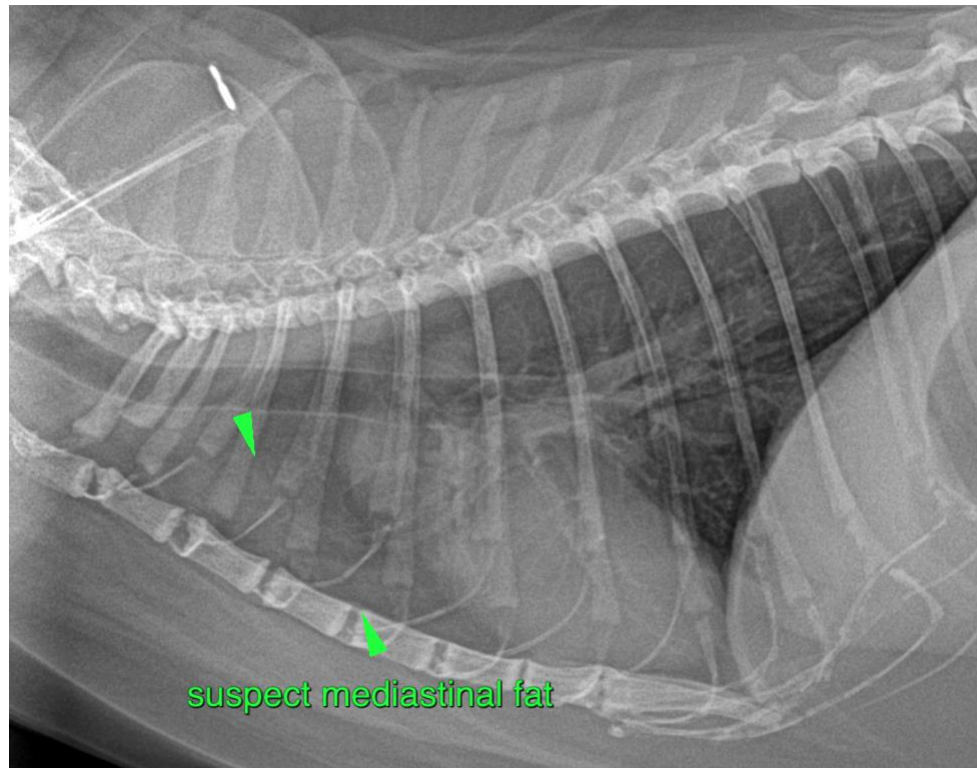
Neutered Male

AGE

17 Years

INTERPRETED BY

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HOSPITAL NAME

Truscott Animal
Hospital

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.

REFERRING VET

Dr. Medhat Meawad

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
sebast.schaub@gmail.com

INVOICE

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DATE

3-18-23