



**PATIENT**

Buttercup Munir

**PRESENTING CLINICAL SIGNS**

Buttercup came in today as she was vomiting yesterday twice and today three times . the last 2 times was pink color foam ( the owner think the vomit may have blood)

**SPECIES**

Feline

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**BREED**

British Long Hair

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**SEX**

FS

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.

**AGE**

15 Months

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 splenic body and tail are considered normal for position, size, shape and opacity.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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.

The stomach is in its anticipated position and empty.

**HOSPITAL NAME**

Brittany Glen Animal  
Hospital

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 is empty but a small amount of unformed material. Ventral to L6, a roundish soft tissue opaque structure is seen dorsal to the descending colon, measuring 9 mm in diameter.

**REFERRING VET**

Dr. Bektor

**RADIOGRAPHIC DIAGNOSIS**

- Empty gastrointestinal tract & unformed fecal material in colon
- Suspect lymphadenopathy colonic lymph node

**INVOICE**

50853

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study presents no specific abnormalities, explaining the history of vomiting. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. The presumptive diagnosis is gastroenteritis. If clinical signs are refractory to empirical therapy, recommend follow up radiographs or a complete abdominal ultrasound examination; in some cases, a high ileus may lack classical radiographic signs of mechanical obstruction.

**DATE**

3-9-22



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**REFERRING VET**

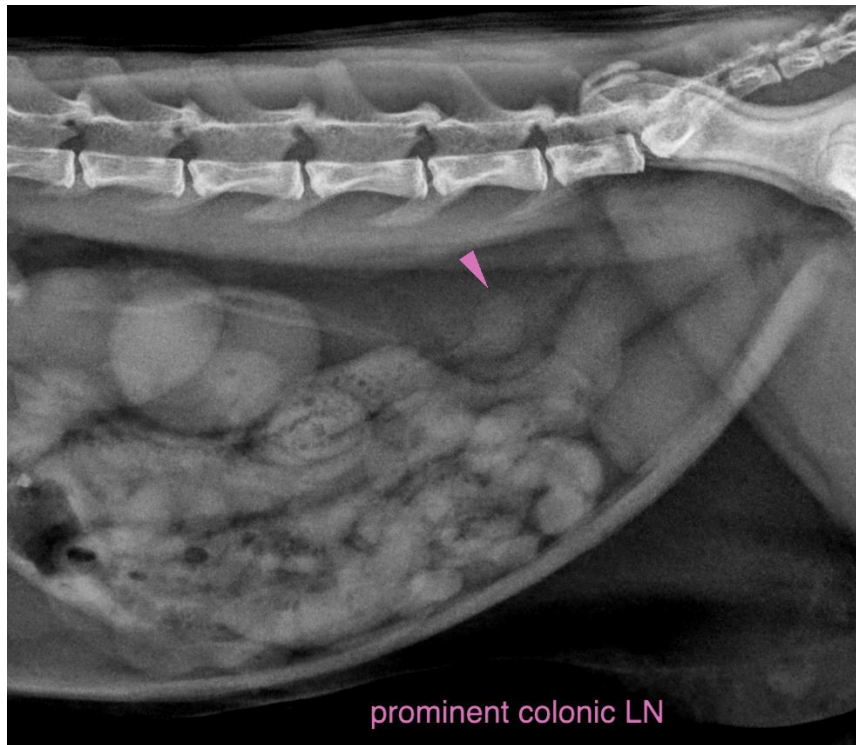
Dr. Boktor

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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  
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