



PATIENT PRESENTING CLINICAL SIGNS

Stella Fox no stool since last Friday, peed on bed 2 days ago could she has megacolon?. not using litter box, still eating and drinking
Abnormal PE/Chem/CBC/UA Results: BW=WNL

SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED RADIOGRAPHIC FINDINGS

DMH The surrounding bony structures are within normal limits.

SEX

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

Female Spayed

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

AGE

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

7 Years

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

The kidneys present mild irregular margins. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

HOSPITAL NAME

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.

St. Catherine's Animal Hospital

The colon is seen in the expected position and contains a moderate amount of hyperdense fecal material. No pathological dilation of the colon is appreciated.

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

- Constipation
- Chronic nephropathy
- Mild obesity
- No signs evidence of megacolon

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

4-7-22

The findings are consistent with constipation, but unfortunately reveals no specific underlying cause. The most frequent comorbidities are chronic kidney disease or obesity (like in this patient), however a multifactorial pathomechanism for recurrent constipation is considered in feline patients and a primary cause may not be found in many cases. Consider a complete abdominal ultrasound examination to check for mural abnormalities of the gastrointestinal tract to rule out IBD/lymphoma.



PATIENT

Stella Fox

At this point, a rectal tube with lubricant and treatment with Cisapride support peristalsis of the colon. An enema under general anesthesia is recommended if the patient does not defecate. For long term treatment, dietary management (e.g. soluble fibers and psyllium) with or without oral lactulose may help to support digestive transit and soften the stool. Increase water intake may be beneficial as well.

SPECIES

Feline

BREED

DMH

SEX

Female Spayed

AGE

7 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

St. Catherine's Animal
Hospital

REFERRING VET

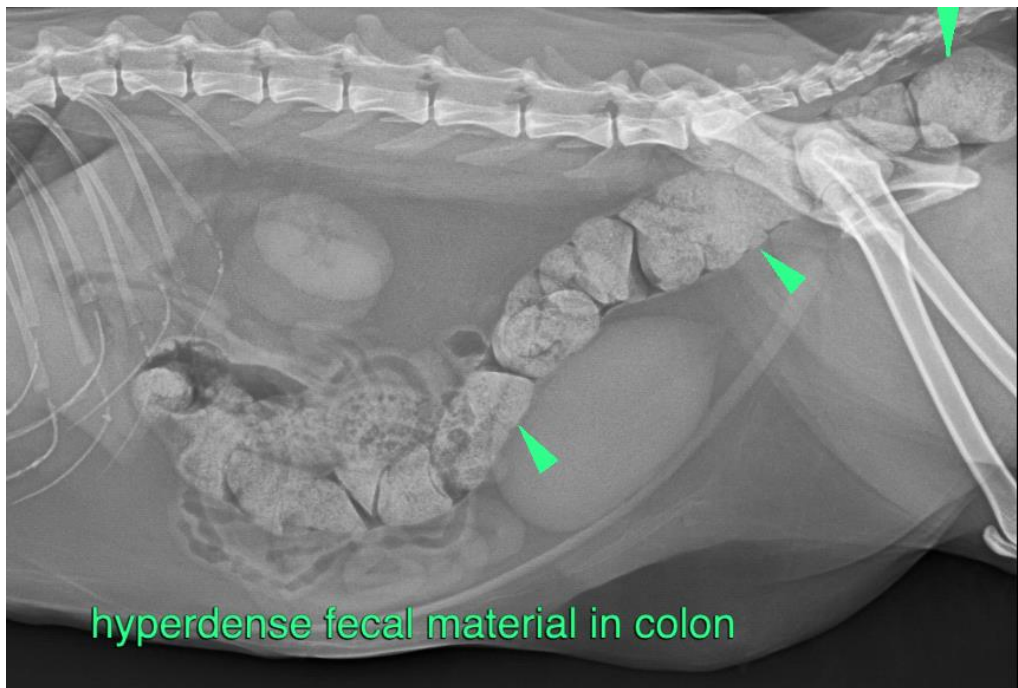
Dr. Mena

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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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