



PATIENT

Snowflake Winslade

PRESENTING CLINICAL SIGNS

NOT INTERESTED IN EATING , VOMITING FOR 2 DAYS
Abnormal PE/Chem/CBC/UA Results: BLOOD WORK IS UNREMARKABLE

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

Snow Bengal X

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits, the growth plates are age related open.

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

SEX

Female

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

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.

AGE

12 Weeks

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 contains a small amount of fluid and gas.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The small intestinal loops are mildly distended by gas and fluid. The small intestinal loops present an even diameter, and no pathological shape of the intraluminal gas bubbles is appreciated.

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.

HOSPITAL NAME

St. Catherine's Animal
Hospital

The colon is seen in the expected position and contains a small amount of gas. No formed fecal material is appreciated throughout the colon.

RADIOGRAPHIC DIAGNOSIS

- Mild gas and fluid pattern of the gastrointestinal tract

REFERRING VET

Dr. Boctor

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pattern of the gastrointestinal tract is suggestive for underlying gastroenteritis. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction. Complementing workup by fecal exam to screen for parasitic infection appears beneficial as well. If clinical signs are refractory to 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

INVOICE

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DATE

6-29-22



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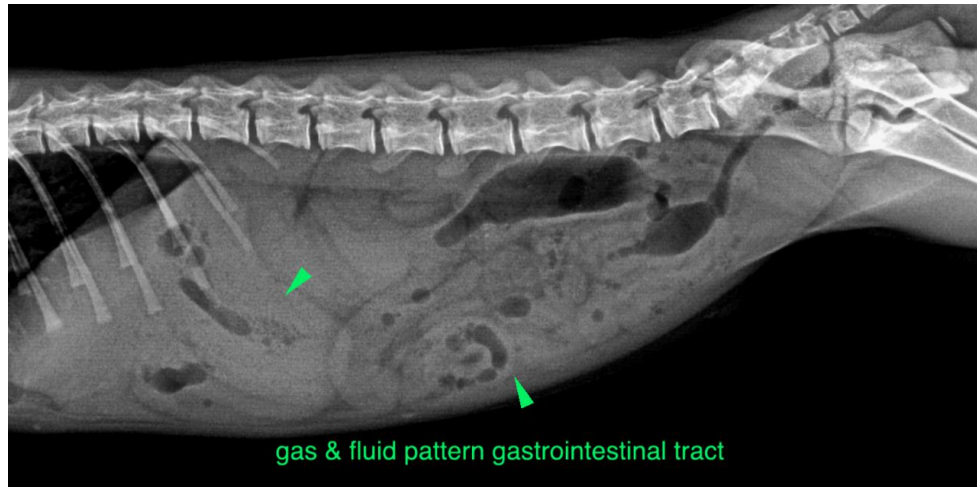
Dr. Boctor

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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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