



**PATIENT PRESENTING CLINICAL SIGNS**

Goonie Dechiaro P presents for GI upset. P has a hx of GI issues that seemed to work themselves out. Has been on a slew of different foods (RC Digestive Care - OTC; Cat Chow, Fancy Feast, and Fiber Response that housemate is on). O states that P vomited on Wednesday going into Thursday, and then again yesterday after she gave him 1ml of Veraflox after she noticed he had some scratches on the inner corners of his eyes. Yesterday's vomitus smelled like feces per O. O gave him 100mL's of LRS and P did not throw up again. Ate between 3pm and 10pm, but no appetite today. Has not had a BM since Saturday night. P is not UTD on vx's - multiple cat household. O believes P is slowing down. Abnormal PE/Chem/CBC/UA Results: pending

**SPECIES**

Feline

**BREED**

DSH

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

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

**RADIOGRAPHIC FINDINGS**

**SEX**

The surrounding bony structures are within normal limits.

Neutered Male

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**

11 Years

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

In the VD projection, at the medial aspect of the spleen, an ovoid shaped soft tissue opacity is appreciated.

**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.

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The stomach is in its anticipated position and empty.

Multiple small intestinal loops are significantly dilated and contain foamy soft tissue material with interspersed granular mineralization. A second population of small intestinal loops, presenting a physiological diameter and mild gas pattern is appreciated. In the left lateral projection, in the cranioventral abdomen, an intestinal loop, presenting a prominent wall is appreciated.

**REFERRING VET**

Dr. Miller

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

The included parts of the lung field, present an ovoid shaped soft tissue mass in the dorsal aspect of the right caudal lung lobe, extending over 2.5 intercostal spaces.

**RADIOGRAPHIC DIAGNOSIS**

**INVOICE**

59403

- Segmental small intestinal mechanical obstruction
- Possible splenic soft tissue mass
- Pulmonary soft tissue mass right caudal lung lobe

**DATE**

7-17-23

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The pattern of the small intestinal tract indicates segmental small intestinal mechanical obstruction – an underlying cause cannot be clearly specified but there might be a mural mass – neoplastic origin is considered most likely (e.g. carcinoma, round cell tumor), other potentials include foreign body,



**PATIENT** invagination or extramural lesion (e.g. stricture). An abdominal ultrasound examination, however laparotomy is indicated.

Goonie Dechiaro

The rounded soft tissue opacity level with the body of the spleen is suggestive for splenic mass (e.g. round cell tumor).

**SPECIES**

Feline

The pulmonary mass can present primary pulmonary neoplasia, metastasis or granuloma. The odds for cystic pulmonary lesion are low.

**BREED**

DSH

**SEX**

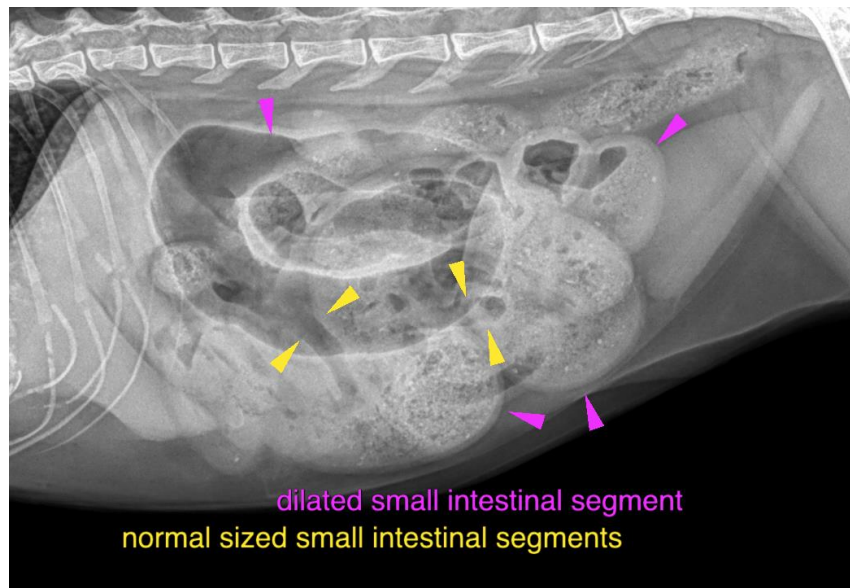
Neutered Male

**AGE**

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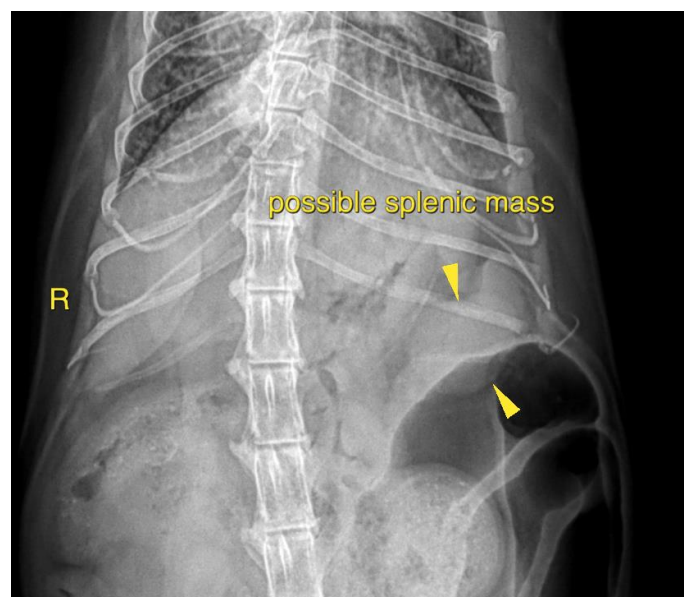
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**PATIENT**

Goonie Dechiaro

**SPECIES**

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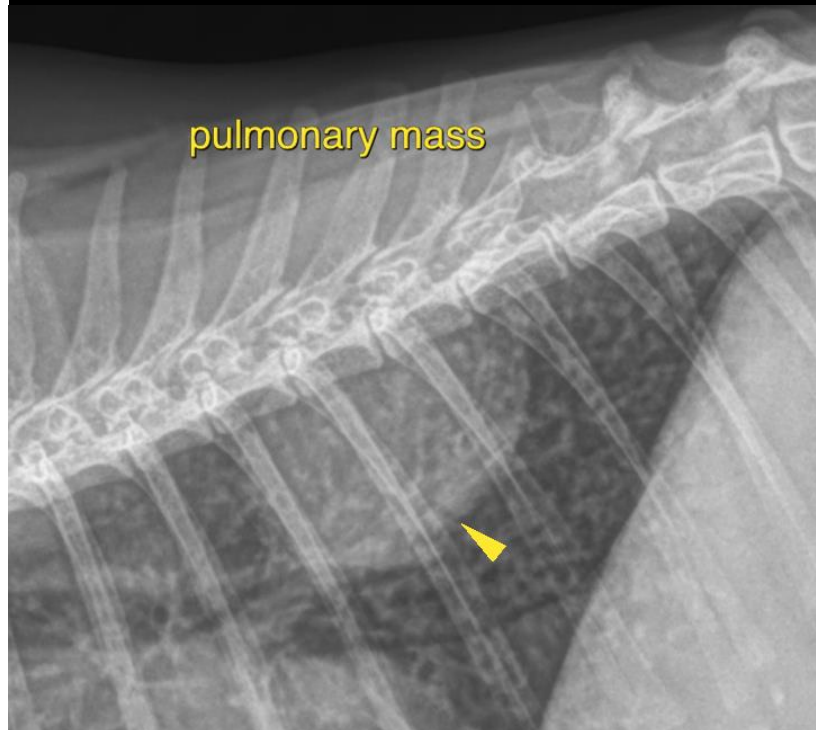
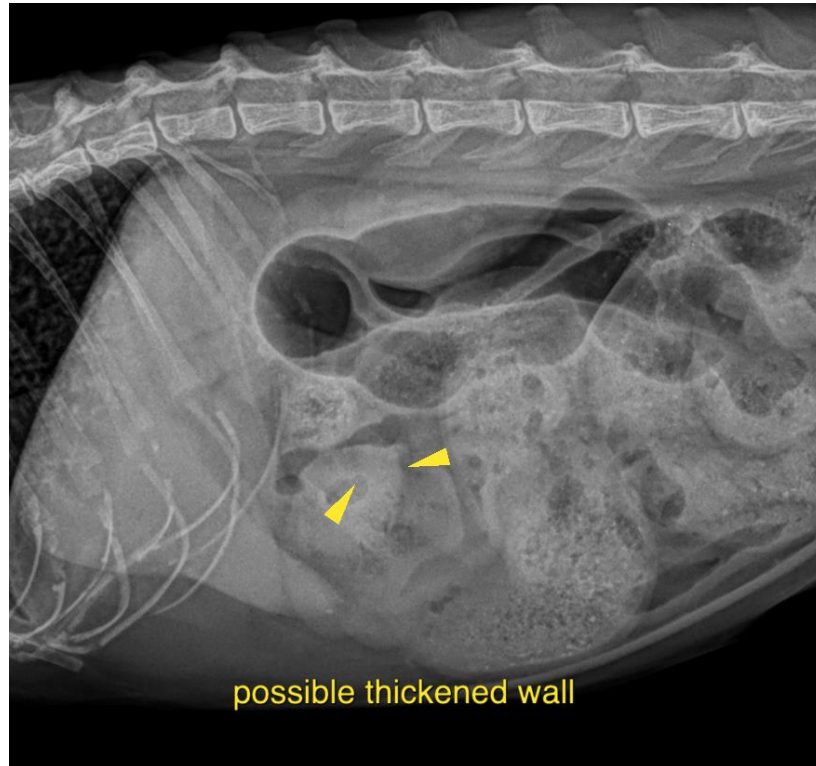
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**PATIENT**

Goonie Dechiaro

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)

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**SEX**

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