



**PATIENT PRESENTING CLINICAL SIGNS**

Onyx Weiler O noted distended abd ~ 1 week ago. P intact. Indoor only. Per o still e/d, u/d ok. No v/d/c/s. bw pending. no murmur ausculted. FIV/Felv negative. Not utd w/vaccines.

**SPECIES RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN**

Feline An overview study including the thorax and abdomen in three imaging planes is provided for review.

**RADIOGRAPHIC FINDINGS**

**BREED** The body condition score is 2-3/9.

Thorax

DSH

Multifocal spondylosis formation is seen along the thoracic spine.

**SEX** The extrathoracic soft tissues present homogeneous without abnormalities.

M

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**

13 Years

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

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

**INTERPRETED BY**

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

The Pet Hospital of  
Stratford

The intervertebral disc spaces L1/L2 is narrowed.

The abdomen is distended. The peritoneal serosal detail is lost due to significant amount of peritoneal soft tissue material, effacing the margins of the abdominal organs. Mild gas distended small intestinal loops are appreciated in the mid abdomen.

**REFERRING VET**

**RADIOGRAPHIC DIAGNOSIS**

Dr. Rodriguez

- Marked peritoneal effusion
- Emaciation
- Discopathy L1/L2
- Spondylosis deformans
- Normal thorax

**INVOICE**

59677

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

8-14-23

The distended abdomen is caused by significant amount of peritoneal effusion. An underlying cause cannot be specified by radiography. If not done so yet, recommend tapping the peritoneal effusion including a complete fluid analysis. Complementing workup by an abdominal ultrasound examination – after draining the peritoneal effusion – would be ideal for further assessment of the abdominal organs.



**PATIENT**

Onyx Weiler

**SPECIES**

Feline

**BREED**

DSH

**SEX**

M

**AGE**

13 Years



**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

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**REFERRING VET**

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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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