



PATIENT

Pekoe DiPinto

PRESENTING CLINICAL SIGNS

lethargic, not eating drinking, owner not sure about urination & bowel movements
 Abnormal PE/Chem/CBC/UA Results: 8% dehydration, wheezing on auscultation of lungs, leukopenia, fPL- WNL,

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE ABDOMEN

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

BREED

DMH

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

SEX

Male Neuter

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.

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

AGE

4 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.

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The stomach is in its anticipated position. In the stomach a curled up loop of radiopaque linear material is seen

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 presents with appropriate content.

RADIOGRAPHIC DIAGNOSIS

- Gastric foreign body, suspect loop of plastic material

REFERRING VET

Dr. Jui Gokhale

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study is consistent with gastric foreign body – that is a potential source for hyporexia. Removal of the foreign body by gastroscopy or surgical intervention is recommended.

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The intestinal tract presents without signs of mechanical obstruction or radiopaque foreign material.

DATE

8-23-22



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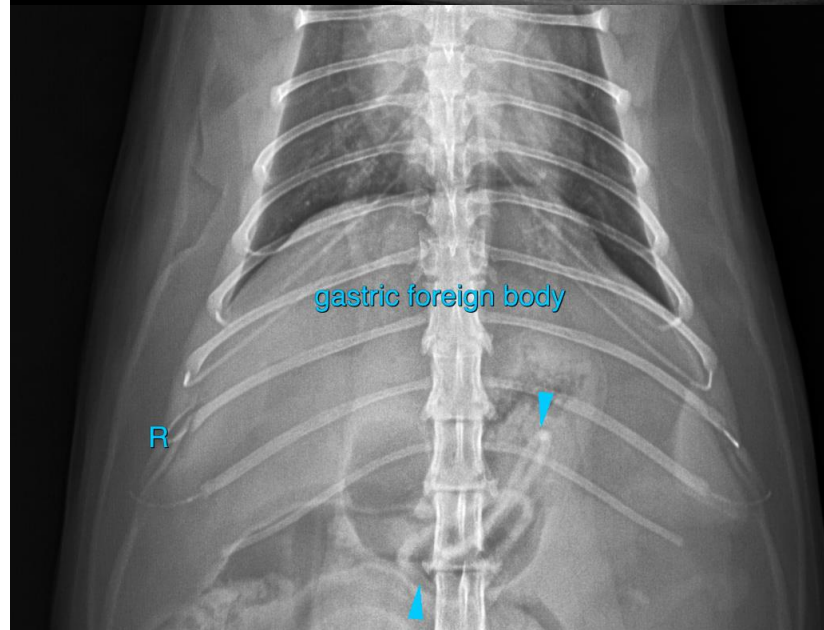
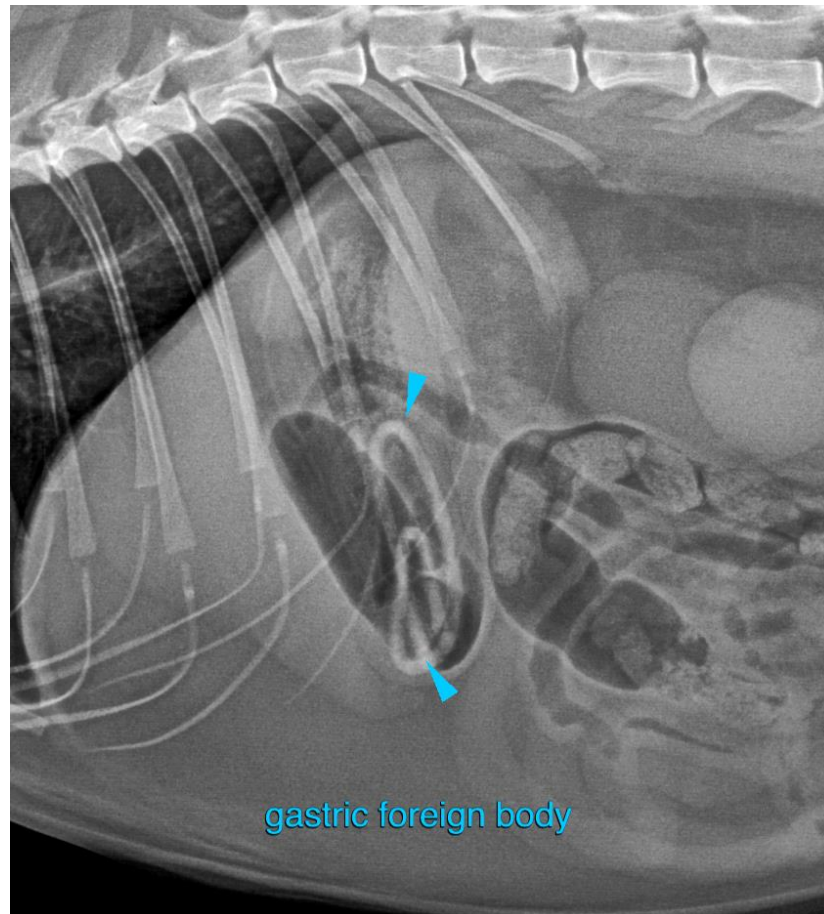
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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