



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Ochabod McDonough
PRESENTING CLINICAL SIGNS History: Chronic respiratory wheeze but has worsened some in the last few weeks per the owner. History of lungworm as a kitten which was successfully treated. Exam: BCS 7/9, respiratory wheeze with an inspiratory strider.

SPECIES Abnormal PE/Chem/CBC/UA Results: NSF

RADIOGRAPHIC STUDY OF THE THORAX

SPECIES Feline
 The body condition score is 9/9 with smooth alternating layers of fat and soft tissue opacity.

BREED On the lateral views the ribs of each vertebra are superimposed onto each other.

DSH The lungs are in contact with the thoracic boundaries and the tips are pointed. On one right lateral recumbent view the lobar vessels are smudged and bronchi are highlighted. Some bronchi show a peripheral wall thickening. On the other views the interstitial pattern is more reticular and thinner.
SEX The diaphragm is straight and upright on the lateral views, on the VDs a Christmas tree like diaphragmatic outline is evident. The gap between heart and diaphragm is slightly increased on all views.

Neutered Male

AGE The cranial mediastinum is of physiological size and opacity. The trachea diverges slightly from the thoracic vertebrae and dips at the carina. A small amount of air is present in the esophagus on the left lateral recumbent view.

7 Years 6 Months
 The cardiac silhouette is elevated from the sternum by fat and the left side has a double outline on the VD due to the pericardial fat. It occupies 75% of the chest height and 2.5 intercostal spaces. No obvious chamber or outflow tract enlargement is evident.

INTERPRETED BY RADIOGRAPHIC DIAGNOSIS

- Heike Rudolf, DVM,
 Dr. med. Vet.,
 DipECVDI DVR
- Reticular interstitial pattern
 - Early peribronchial component
 - Obesity
 - Dyspnea

HOSPITAL NAME INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Brunswick VH
 Due to the large amount of fat full lung expansion is not possible but the diaphragmatic shape and parallelity of the ribs indicates dyspnea. Cardiac size is not overtly abnormal, but early HCM can only be ruled out during echocardiography.

REFERRING VET
 Dr. Nicole LaMora
 The generalized interstitial lung pattern is a non-specific finding. Possible differential diagnoses include:

- INVOICE**
- 20449
- Inflammation (allergic e.g. eosinophilic bronchopneumonia, smoke inhalation)
 - Infection (bacterial, fungal, viral, parasitic)
 - Edema
 - Hemorrhage
 - Fibrosis
 - Tumor (e.g. lymphoma)

DATE

1/6/23



PATIENT

Ochabod
McDonough

Should faecal samples yield a negative result, tracheobronchoscopy with bronchoalveolar lavage is recommended. During intubation pharynx and larynx should be examined for masses and inflammation. The clinical signs of wheezing and the signs of dyspnea suggest feline asthma. Should hematology and body temperature be normal, corticosteroids may be tried if the animal is not deemed stable for a G.A.

SPECIES

Feline

Obesity is known to worsen clinical signs of cough and impair lung function; weight control is strongly recommended.

BREED

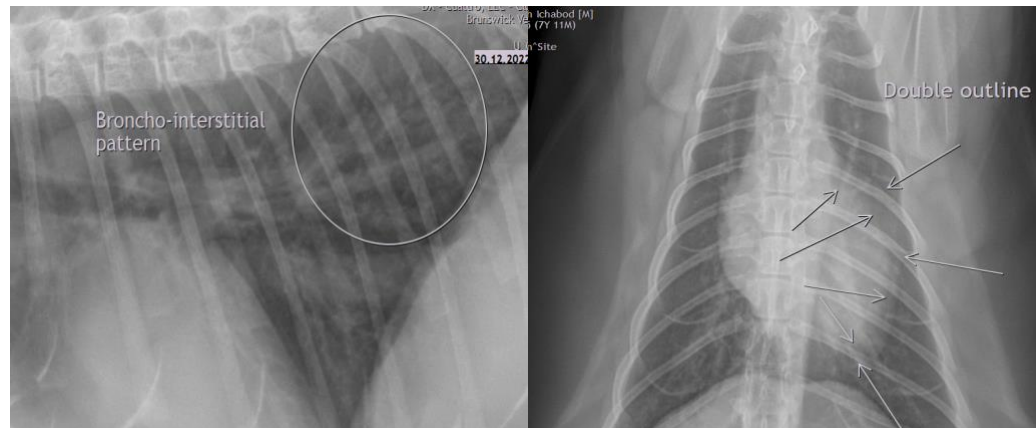
DSH

SEX

Neutered Male

AGE

7 Years 6 Months



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.

INTERPRETED BY

Heike Rudolf, DVM,
Dr. med. Vet.,
DipECVDI DVR

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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dr.h.rudorf@gmail.com

HOSPITAL NAME

Brunswick VH

REFERRING VET

Dr. Nicole LaMora

INVOICE

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