



PATIENT

Mikey Slobozian

SPECIES

Fel

BREED

DSH

SEX

MN

AGE

8M

WEIGHT

10lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

James Hornbuckle

HOSPITAL NAME

Golden Isles Animal
Hospital

REFERRING VET

James Hornbuckle

INVOICE

72694

DATE

11-20-25

PRESENTING CLINICAL SIGNS

Mikey presented for panting after exercise. He was recently neutered however the behavior has been taking place before surgery. His physical exam remains normal auscultation of his lungs is free of rales and wheezes. There is no reported cough no reported upper respiratory signs. He is afebrile eating and drinking well and otherwise normal. The open mouth breathing episodes only happen after exercise / zoomies. Initial investigation : chest X rays.

RADIOGRAPHS OF THE THORAX

R/L lateral and VD are provided, totaling 4 radiographs for interpretation.

RADIOGRAPHIC FINDINGS

The body condition score is 6/9 with smooth, alternating layers of fat and soft tissue opacity.

The bony structures are physiological.

The open growth plates are compatible with the given age.

The cranial mediastinum is of physiologic size and opacity. A triangular soft tissue shadow cranial to the heart is consistent with the thymus. The trachea diverges from the thoracic vertebrae, and the carina is located level with T5/6.

The degree of pulmonary expansion is fair. The cranial crus of the diaphragm is level with T11/ 12. The lung lobes extend to the thoracic boundaries. Pulmonary vessels are visible to the secondary branches, and the primary vessels appear prominent. On the VD views bronchi are highlighted and the vascular outline is blurred in the right caudal lobe.

The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. A bulge is present on both VD views at 2 o'clock.

RADIOGRAPHIC DIAGNOSIS

- Interstitial pattern R caudal lobe
- Prominent primary vessels
- Cardiac bulge

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are equivocal and not present on all projections. A cardiac bulge with prominent vessels could be due to cardiac disease (e.g. early onset HCM) thus echocardiography is recommended. Fecal samples should be obtained to rule out parasites. Oxygen saturation can be measured in case of early lung fibrosis. Should these examinations be normal, laryngeal cysts and nasopharyngeal polyp should be ruled out. Bronchoscopy with broncho-alveolar lavage for cytology and bacteriology may become necessary if all other examinations fail to provide a cause.



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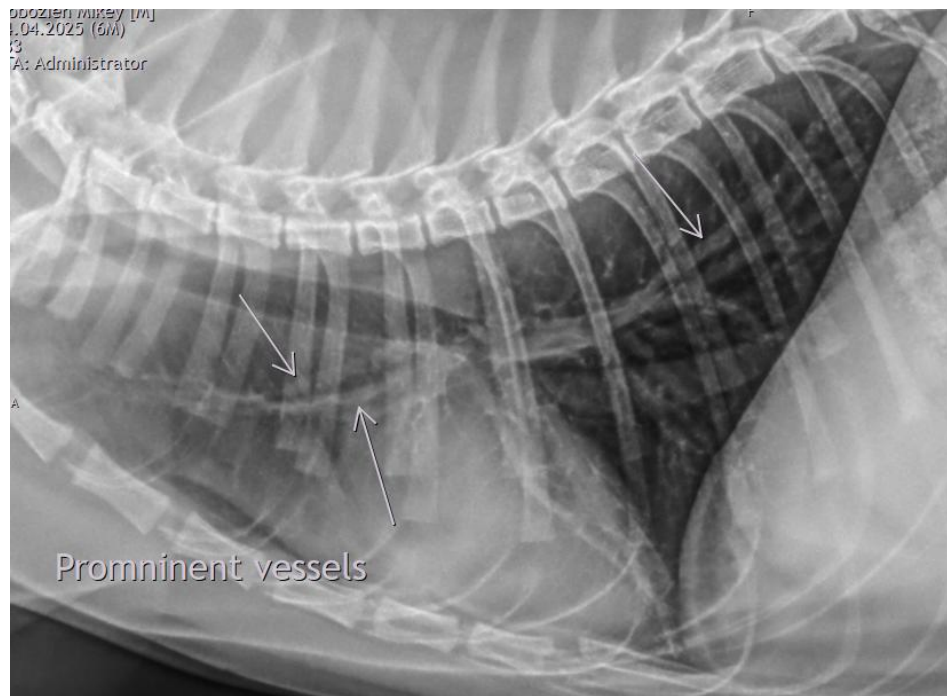
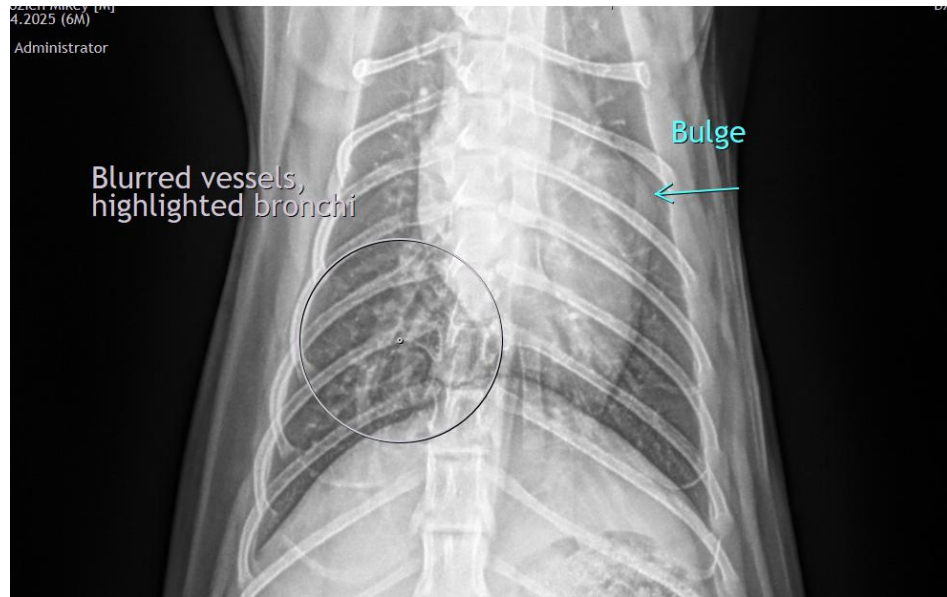
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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

info@sonopath.com

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