



PRESENTING CLINICAL SIGNS

PATIENT

Slater Crabtree

History: Wheezing episodes 1-2 times a day since 90 days. The patient is overweight.
Abnormal PE/Chem/CBC/UA Results: wheezing sound on auscultation of both lungs.

SPECIES

Feline

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

The bones are well mineralized with good trabecular structure and smooth surfaces. The disc spaces appear homogeneous in width.

BREED

Manx

The bony structures appear physiological. The surrounding bony structures are within normal limits. The lungs are in contact with the thoracic boundaries and the tips are pointed. The degree of pulmonary expansion is fair at best. The lobar vessels are poorly outlined and peripheral bronchi are highlighted.

SEX

Neutered Male

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5.

AGE

5 Years

The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. On the DV view the region of both atria appears to be bulging and the contact with the diaphragm is increased.

RADIOGRAPHIC DIAGNOSIS

- Interstitial patter
- Reduced pulmonary inflation
- Obesity

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The generalized interstitial lung pattern is a non-specific finding and accentuated by the only fair expansion of the lung field as well as the obesity. Possible differential diagnoses for a true infiltrate include:

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St. Catharine's AH

- Inflammation (allergic e.g. eosinophilic bronchitis)
- Infection (bacterial, fungal e.g. candida, viral, parasitic)
- Edema
- Fibrosis
- Tumor (e.g. lymphoma)

REFERRING VET

Dr. Hassan Zayadin

Further evaluation by means of tracheobronchoscopy with bronchoalveolar lavage are recommended. Tracheobronchoscopy will also allow assessment of tonsils and larynx to rule out mass lesions. The nasopharynx should be checked for a polyp.

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The appearance of the cardiac silhouette on the DV view is most likely due to the surrounding pericardial fat. Should a murmur be present, echocardiography is necessary to rule out HCM.

DATE

8/19/21



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

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

INTERPRETED BY

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