



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Shady Carrier
SPECIES Feline
BREED Balinese Mix
SEX Neutered Male
AGE 8 Years

History: Shady has been having sneezing episodes that started around the beginning of January 2022. He has been having sneezing fits and sounds congested/wheezy. He sometimes will breathe with his mouth open a bit, but still has good energy level. Initially he had greenish nasal discharge and was treated with Clavaseptin (10 days) and Metacam (3 days). Rechecked in Mar. 2022 - O reports Clavaseptin improved symptoms but did not fully resolve. Still open-mouth breathing at times and appetite decreased (O thinks b/c he can't breathe); greenish nasal discharge still present. Started on L-Lysine supplement and Doxycycline (4 weeks). On RC Hypo PD for allergies and previous history of eosinophilic granuloma in his mouth.

Abnormal PE/Chem/CBC/UA Results: Sedated exam today: AU - Otoscopic exam was performed - both tympanic membranes were intact and there was no inflammation or debris in the canals; no polyps or masses seen. Also examined up nares with otoscope as well - nasal passages were not erythematous or inflamed from the part that I could see; no nasal discharge; no obvious FB seen. No oral masses or other abnormalities seen on exam - used cotton swab to flip up soft palate to check for polyps - none seen. Mild periodontal disease. Mild generalized muscle atrophy. Otherwise unremarkable. Bloodwork: 1) CBC - Mild neutrophilia (inflammation), otherwise unremarkable. 2) Chem 17 & electrolytes - mildly decreased BUN (decreased muscle mass?), mild hypoalbuminemia (blood loss, inflammation, PLN, PLE, low protein intake) and mild hyperglobulinemia (inflammation, chronic antigenic stimulation, neoplasia), otherwise unremarkable. 3) SDMA - mild to moderately elevated (dehydrated, early renal disease), 4) TT4 - WNL.

RADIOGRAPHIC STUDY OF THE HEAD

The surrounding soft tissue structures appear symmetrical and homogeneous.

INTERPRETED BY Heike Rudorf, DVM, Dr. med. Vet., DipECVDI DVR

The bones of the skull are well calcified with a normal trabecular structure and smooth surfaces. Both frontal sinuses appear to be air filled.

Both nostrils are air filled. The turbinates are well defined and surrounded by air.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces. A lucency is located between premolar 4 and molar 1 on the right side and appears to surround a shortened tooth root of M1.

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 The tympanic bullae are aerated, the bony wall is smooth and thin. Both horizontal ear canals are air filled.

REFERRING VET The upper conducting airways appear physiological.

RADIOGRAPHIC DIAGNOSIS

- Possible periapical lucency M1/PM4

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

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 The clinical signs are suggestive of bacterial rhinitis. I suggest a CT examination to identify localized changes such as nasal granulomata or an oro-nasal fistula at M1 due to periapical infection. A foreign body could be located in the caudal nasal chamber and rhinoscopy is then essential as CT only rarely shows the actual foreign body.

DATE

9/22/22



PATIENT

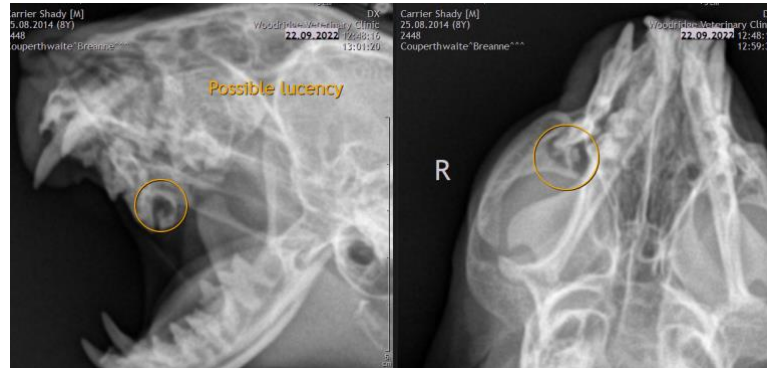
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Heike Rudolf, DVM, Dr. med. vet., DipECVDI, DVR
dr.h.rudorf@gmail.com

INTERPRETED BY

Heike Rudolf, DVM,
Dr. med. Vet.,
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HOSPITAL NAME

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REFERRING VET

Breanne
Couperthwaite

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