



PATIENT

Traicy Rodriguez

PRESENTING CLINICAL SIGNS

Patient was presented for evaluation of bleeding of unknown origin. Owners noticed blood in her bed and the aisle. Patient has been doing well otherwise. Owners have not noticed respiratory symptoms. Thoracic findings were an incidental finding.

Abnormal PE/Chem/CBC/UA Results: CBC - mild leukocytosis, neutrophilia and monocytosis
Chemistry - azotemia with creatinine in 2.7 and elevated amylase at 4,891 PE - suspected dry blood at ventral aspect of vulva

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE THORAX

BREED

DSH

Right lateral and ventrodorsal views totaling 2 images available for review.

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

SEX

Female Spayed

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape and there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

AGE

18 Years

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

Two areas of granulated mineralization are seen in a peribronchial position within the left cranial and left caudal lung lobes. The remainder of the pulmonary parenchyma presents within normal limits.

HOSPITAL NAME

Paseos Veterinary
Center

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

RADIOGRAPHIC DIAGNOSIS

- Clustered peribronchial pulmonary mineralization within the left cranial and left caudal lung lobes.

REFERRING VET

Dra. Martes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

49040

The radiographic findings are suggestive for incidental peribronchial mucinous gland mineralization which can occur without underlying disease/idiopathic or as a consequence of chronic lower airway disease. Differential diagnosis also includes granulomatous lung disease, neoplasia, metastatic calcification, and heterotopic bone, which, however, all are considered less likely than idiopathy/ chronic inflammatory perimucinous gland mineralization. The area of calcification does not appear to be in an area that would be well accessible for ultrasound guided fine needle aspiration and especially in cats, the risk of pneumothorax always has to be considered with interventional sampling under ultrasonographic guidance. At this point, further radiographic monitoring is advised. A radiographic recheck could be scheduled in 2-3 months or at any other time should clinical signs occur.

DATE

12-14-21



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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.

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