



PATIENT PRESENTING CLINICAL SIGNS

Dante Perez Pet presented for chronic cough and nasal discharge that started after dental cleaning with extraction of 207 in September (3 months ago).

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Feline Plain and post contrast studies of the head and post contrast study of the thorax available for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

DSH **Head**

SEX
MN Patient has a history of extractions of the triadans 107 and 207. Both dental alveolus present within normal limits. Mild generalized resorptive changes of the tooth roots of the remaining teeth are seen. There is no evidence of a dentonasal fistula. Advanced tooth root resorption of the triadan 304 is noted. There is a complicated crown fracture of the triadan 307. However, the surrounding alveolar bone appears to be inert.

AGE
14 Years The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

INTERPRETED BY Thin and smoothly folded conchae and turbinates with even smooth mucosal lining.

Nele Eley, DVM
Dr. med. Vet. DipECVDI Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

HOSPITAL NAME Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external auditory meatuses present within normal limits.

Mobile Pet Imaging
CFL The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

REFERRING VET The salivary glands present within normal limits.

Borecky **Thorax**
The bony and surrounding soft tissue structures are within normal limits.

INVOICE
49072 The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

DATE The cardiovascular structures including the pulmonary vasculature are within normal limits.

12-15-21 The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within



PATIENT normal limits.

Dante Perez Partial lobar atelectasis of both subsegments of the left cranial lung lobe is seen. There is partial atelectasis of the right middle lobe. The aerated lung presents a mild generalized bronchial pattern.

SPECIES Feline
Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- BREED** DSH
- Bronchial lung pattern with lobar atelectasis.
 - History of dental extractions with normal findings of the alveolar bone - no evidence of dental fistulae.
 - Advanced resorption triadan 304.
 - No structural evidence of rhinosinusitis.

SEX MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE 14 Years
The CT study reveals evidence of chronic lower airway disease. The atelectasis may be enhanced by the general anesthesia however, bronchial mucus plugging is a potential as well. Differential diagnosis includes feline allergic recurrent lower airway disease versus less likely infectious bronchitis such as viral, bacterial, parasitic, or protozoal.

There is no structural evidence of upper airway involvement at this time and no evidence of dental changes that would be relevant to the current clinical signs.

INTERPRETED BY

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HOSPITAL NAME

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REFERRING VET

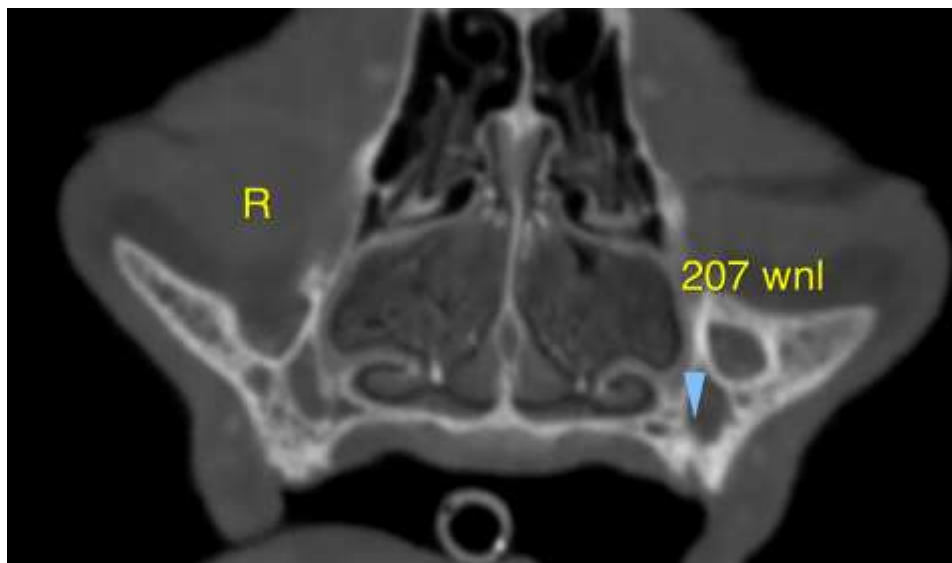
Borecky

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DATE

12-15-21





PATIENT

Dante Perez

SPECIES

Feline

BREED

DSH

SEX

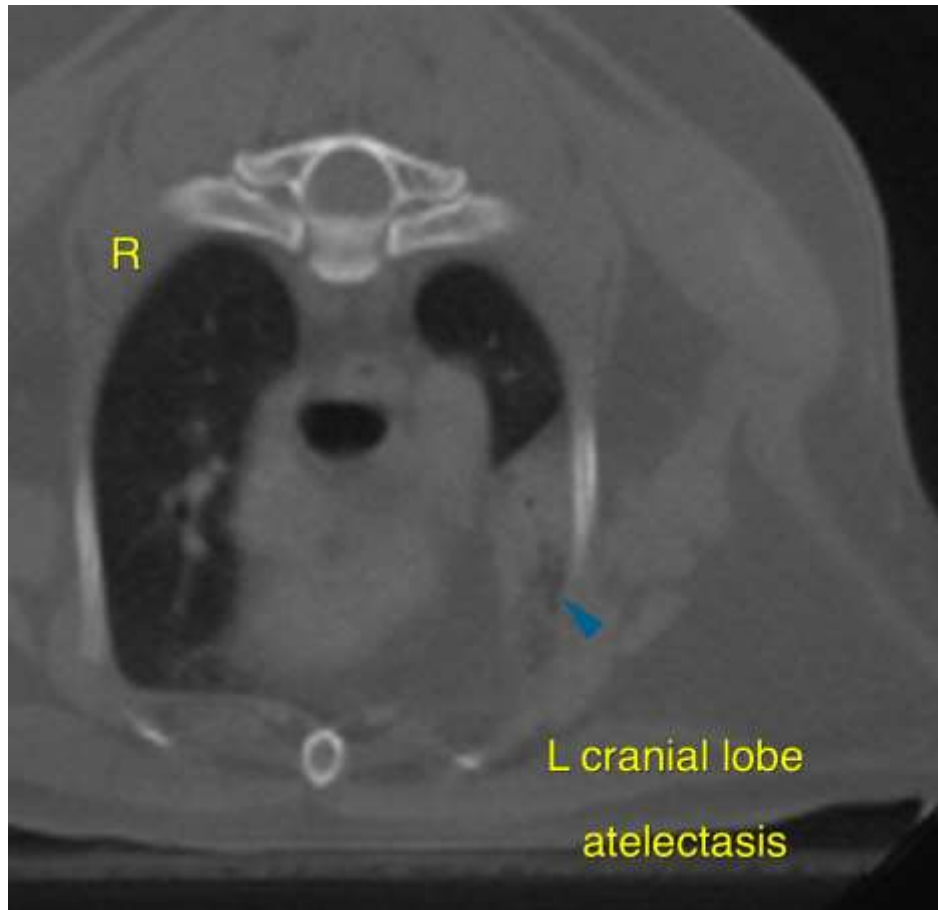
MN

AGE

14 Years

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HOSPITAL NAME

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CFL

REFERRING VET

Borecky

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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