



PATIENT

Oscar Butterfield

SPECIES

Feline

BREED

Bengal

SEX

MN

AGE

6

WEIGHT

5.80

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

RVT

HOSPITAL NAME

Oxford County
Veterinary Clinic

REFERRING VET

Amy Lynes

INVOICE

72879

DATE

12-4-25

PRESENTING CLINICAL SIGNS

6yo MN Bengal with history of intermittent grade II-III heart murmur. Stressed/aggressive in clinic and when comes in on Gabapentin, heart murmur is not heard. Presented 11/28 for exam due to suspected pillowfoot (plasma cell pododermatitis). Required injectable sedation to examine - discussed risks with owner esp re: hx of heart murmur - methadone 0.15mg/kg - dexmedetomidine 0.010mg/kg given, moderate sedation achieved. Patient sent home with doxycycline (8.6mg/kg dose) x 5 days and prednisolone (0.86mg/kg dose) BID x 7 days, then wean. Today - 12/4/25 at 4pm noted increased respiratory rate and effort at home and brought into clinic. Temp 37.2, Pulse 192, Resp 72. Lungs auscultate clear, no crackles/wheezing. Gave torb 0.2mg/kg and resp rate drastically improved. When calm, listened to heart and could hear grade II-III heart murmur. 3v chest rads taken and submitting for evaluation. Prednisone course being tapered more quickly and stopped doxycycline.

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views of the thorax totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

The lungs are deeply inflated. The ribcage is barrel shaped.

Increased cardio diaphragmatic distance is noted. Elongation of the cardiac silhouette with mild tracheal elevation is present. VHS is approximately 8. Mild widening of the cardiac silhouette is noted on the ventrodorsal view. Dilated pulmonary vessels are seen in both orthogonal views.

No overt evidence of pulmonary edema even though a mild increase in interstitial pulmonary opacity is noted with ventral accentuation.

Mild pleural effusion is present.

RADIOGRAPHIC DIAGNOSIS

- Suspect emerging or resolving cardiogenic pulmonary edema.
- Mild cardiomegaly.
- Mild pleural effusion.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The combination of the radiographic findings suggest potential for emerging or resolving cardiogenic pulmonary edema potentially exacerbated by corticosteroid therapy. Underlying cardiomyopathy cannot be excluded; especially atypical or early disease is possible.

Close clinical monitoring of respiratory rated effort is recommended. Consider diuretic therapy, repeat thoracic radiographs, and echocardiography is recommended to assess cardiac structure and function and quantify potential cardiomyopathy. Minimize corticosteroid exposure as possible.



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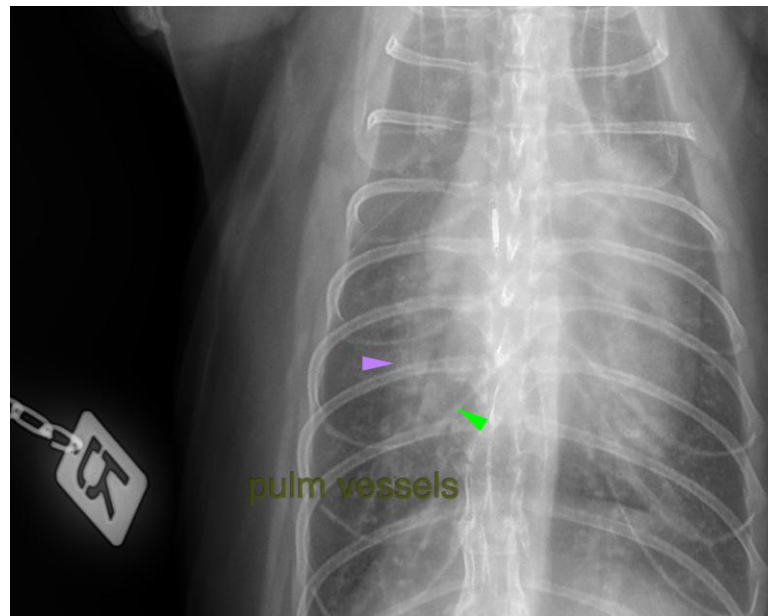
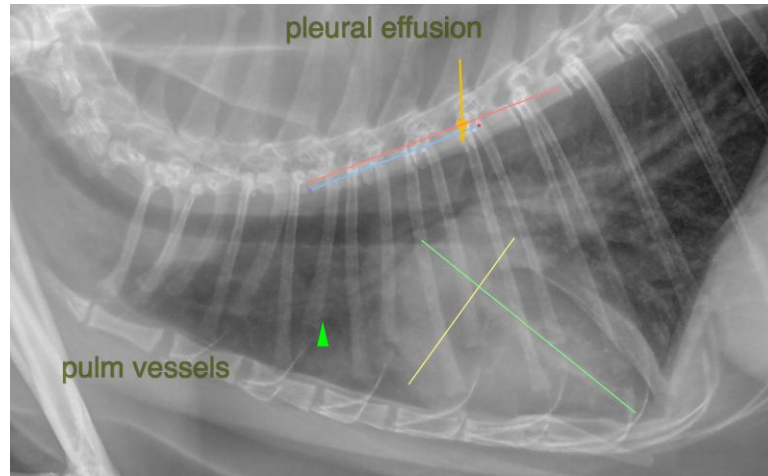
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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