



PATIENT PRESENTING CLINICAL SIGNS

Thor Perez Pet is here for acting lethargic the last couple days. Owner states pet is hiding. did not eat yesterday. Pet seems to grown when picked up. Pet has not had any vet care over the last 4 years. ABDOMINAL ULTRASOUND SENT PRIOR

SPECIES Abnormal PE/Chem/CBC/UA Results: Physical Examination Key -- (N= Normal, A= Abnormal) CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear AU. OU: mild crusting discharge. No nasal discharge. No cough on tracheal palpation. Oral cavity: Moderate dental tartar Musculoskeletal: BCS = 4/9. Ambulatory x 4. Mild to moderate generalized muscle wasting Uro/Perineum: No significant lesions Abd/GI: Soft, non-painful. No masses or fluid wave palpated. R kidney small Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. No significant abnormalities Skin: Good hair coat. No ectoparasites seen Mentation: QAR Hydration: ~5%dehydration Fecal: Not performed today Diagnostic Testing Needed: Feline complete wellness, Thoracic radiographs, AUS Declined Diagnostics/Treatments: None Findings: 1) CBC: RBC 0.77 (6.54-12.20), HCT 4.5 (30.3-52.3), HGB 2.4 (9.8-16.2), RETIC 57.1 (3.0-50.0), EOS 0.11 (0.17-1.57), PLT 108 (151-600) 2) CHEM: SDMA 16 (0-14), BUN 37 (16-36) 3) TT4: WNL 4) FeLV/FIV/HW snap test: Negative 5) UA (cysto): SG 1.030, PRO 30mg/dL, WBC <1/hpf, RBC <1/hpf no bacteria or crystals present 6) Thoracic radiographs (met check): No obvious pulmonary nodules. Final consult pending

Feline

BREED DSH

SEX NM

AGE 13 Years, 4 Months

RADIOGRAPHIC STUDY OF THE THORAX

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

INTERPRETED BY RADIOGRAPHIC FINDINGS

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Moderate spondylosis deformans is present at T9/10.

Mild air trapping is seen and indicated by a hyperlucent and large lung field, flattened diaphragmatic cupola, widened lumbodiaphragmatic angle, and slightly barrel shaped chest. A moderate generalized bronchial lung pattern is seen and evenly distributed throughout the lung.

HOSPITAL NAME

DPC Veterinary Hospital

Cardiac silhouette is upright and thin. The caudal vena cava and pulmonary vasculature is thin as well. There is no evidence of pulmonary masses or mediastinal mass effects.

Course and width of the trachea are considered within normal limits.

REFERRING VET

Dr. Rivera

RADIOGRAPHIC DIAGNOSIS

- Moderate bronchial lung pattern with air trapping.
- Hypovolemia with microcardia and underperfusion of the lung.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings suggest potential for lower airway disease such as recurrent allergic lower airway syndrome versus infectious bronchitis. The changes may not be of clinical significance and further definition is only recommended in case of pertinent clinical signs.

DATE

5-12-22



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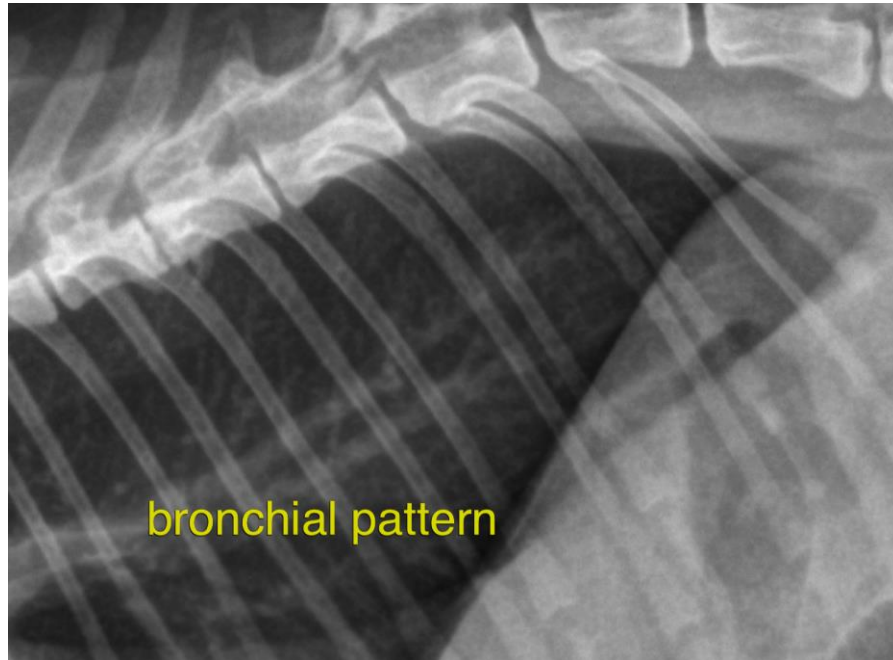
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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