



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Midnight Lobo Reason for Visit: coughing ,open mouth breathing "months" . trouble walking History: 17y mn indoor multi cat house. HX: CKD. Owner reports coughing months "getting worse with open mouth breathing" and trouble walking for weeks . Chronic PU/PD

**SPECIES** Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear OU and AU. No nasal discharge. No cough on tracheal palpation. Oral cavity: Musculoskeletal: BCS = /9. Ambulatory x 4 Uro/Perineum: No significant lesions Abd/GI: Soft, non-painful. No masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. No significant abnormalities Skin: Good hair coat. No ectoparasites seen Mentation: BAR, QAR, Dull, Obtunded Hydration: N, ~5%, ~7%, ~10% dehydration Rectal: No masses, normal stool, no bleeding

**Feline**

**BREED** DLH

**RADIOGRAPHIC STUDY OF THE THORAX**

**SEX** Radiographs of the thorax in two orthogonal imaging planes are provided for review.

NM

**RADIOGRAPHIC FINDINGS**

**AGE** Multifocal moderate spondylosis formation is seen along the thoracic spine.

17 Years, 8 Months The extrathoracic soft tissues present homogeneous without abnormalities.

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

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

**HOSPITAL NAME** There is multifocal moderate peribronchial cuffing. The left cranial lung lobe is consolidated and presents a moderately decreased volume. There is a mediastinal shift to the left.

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

**REFERRING VET RADIOGRAPHIC DIAGNOSIS**

- Dr. Rivera
- Bronchial pattern without signs of air-trapping
  - Consolidated left cranial lung lobe
  - Spondylosis deformans

**INVOICE INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

49494 The radiographic changes are compatible with feline bronchial disease very likely here ± bacterial or viral superinfection. The consolidated left cranial lung lobe are likely a sequela to chronic inflammatory lower airway disease with mucus plugging. Theoretically bronchial compression of the consolidated lung lobes due to neoplasia or granuloma is a potential, but I consider this less likely.

**DATE**  
1-11-22

Bronchoscopy including BAL might be used as advanced diagnostic tests.



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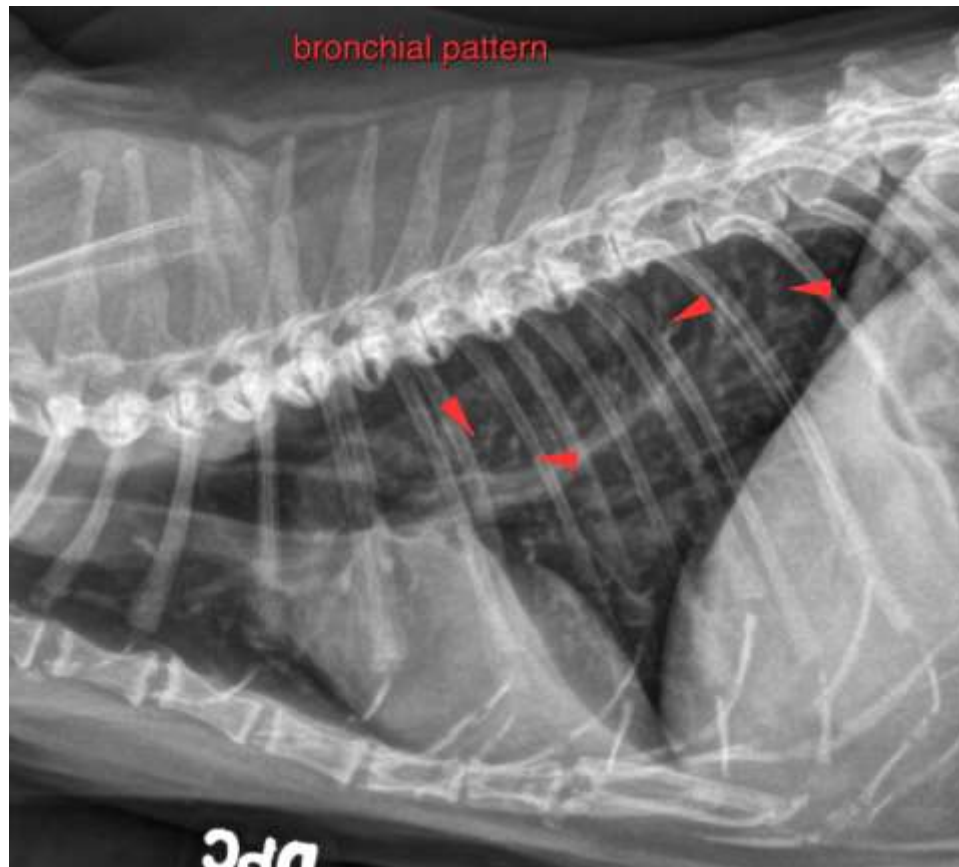
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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