

**PATIENT**

Pazza Campbell

**PRESENTING CLINICAL SIGNS**

Recent onset of mild coughing and wheezing at home. On physical exam mild wheeze ausculted bilaterally. Otherwise healthy pet.

**SPECIES**

Feline

**RADIOGRAPHIC STUDY OF THE THORAX**

Radiographs of the thorax in three imaging planes are provided for review.

**BREED**

DSH

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

**SEX**

SF

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.

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

Mild increased visibility of the bronchial walls is appreciated.

**AGE**

10.5

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

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

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**RADIOGRAPHIC DIAGNOSIS**

- Mild bronchial pattern
- No signs of air trapping

**HOSPITAL NAME**

Brunswick Veterinary  
Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The bronchial lung pattern is suggestive for feline bronchial disease ('feline asthma') without signs of air-trapping. Bacterial, Mycoplasma or viral superinfection may have caused the recent onset of clinical signs. Recommend empirical management. Lower airway sampling can be considered as advanced diagnostic tool as well.

**REFERRING VET**

Dr. Nicole Lamora

**INVOICE**

54797

**DATE**

10-25-22



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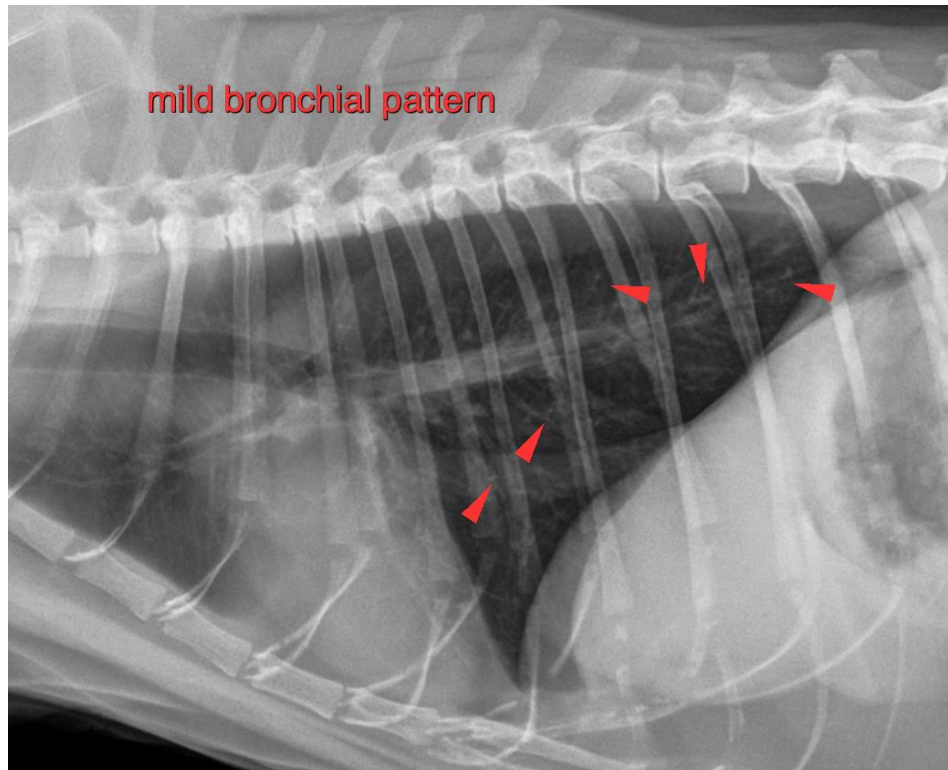
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com