



PATIENT

Koko Meckalazage

PRESENTING CLINICAL SIGNS

presented for a chronic cough which has only partially responded to antibiotic and glucocorticoid therapy. Radiographs were consistent with feline allergic bronchitis and chronic left cranial lung lobe collapse.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: normal

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

A high resolution pre- and post-contrast CT study of the thorax and a post-contrast CT study of the skull are provided for review.

BREED

Seal Point Siamese

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Triadan 102, 106 and 206 are absent.

SEX

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The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining. In the right nasal cavity, mild atrophy of the conchal structures is appreciated. In the left frontal sinus, a small amount of soft tissue material is adhering to the mucosal lining. Both frontal sinuses present moderate hyperostosis.

AGE

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Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The right tympanic bulla is filled with non-contrast enhancing soft tissue material and the osseous lining is mildly thickened and smooth. The left tympanic bulla contains a mild to moderate amount of fluid attenuating material. The external ear canals are within normal limits.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

HOSPITAL NAME

Northeast Veterinary
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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.

Thorax

REFERRING VET

Dr. Runde

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

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 is uniform and considered within normal limits.

INVOICE

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

Generalized mild to moderate thickening of the bronchial walls is appreciated. The bronchial walls are smooth.

DATE

10-26-22

The left cranial lung lobe is consolidated with air-bronchogram, and the volume is significantly decreased. There is evidence of generalized hyperinflation of the lung parenchyma

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



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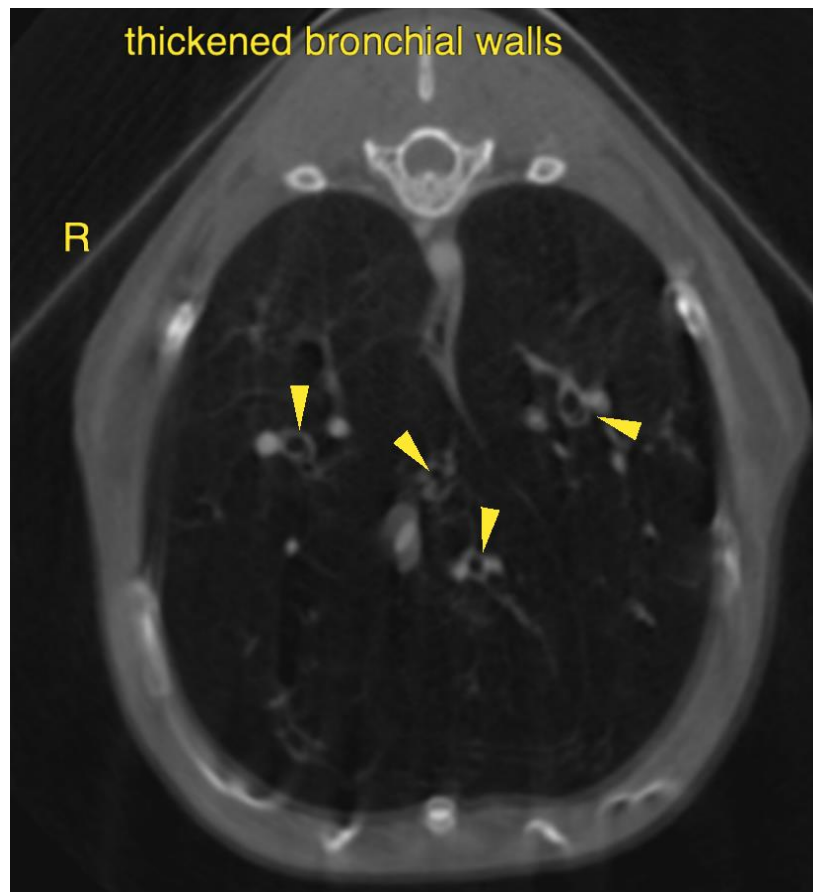
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bronchial lung pattern ± air-trapping versus iatrogenic hyperinflation
- Atelectasis left cranial lung lobe
- Otitis media bilaterally, R>L
- Absent triadan 102, 106 and 206
- Evidence of preceding rhinosinusitis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is supporting the diagnosis of feline bronchial disease ('feline asthma') with secondary (resorption) atelectasis of the left cranial lung lobe possibly due to preceding mucus plugging. Possible viral, bacterial or Mycoplasma superinfection may deteriorate clinical signs. BAL can be considered as advanced diagnostic tool.

The mild nasal conchal atrophy and the changes of the frontal sinus bilaterally indicate preceding upper respiratory tract infection with secondary otitis media due to ascending infection by the Eustachian tube.





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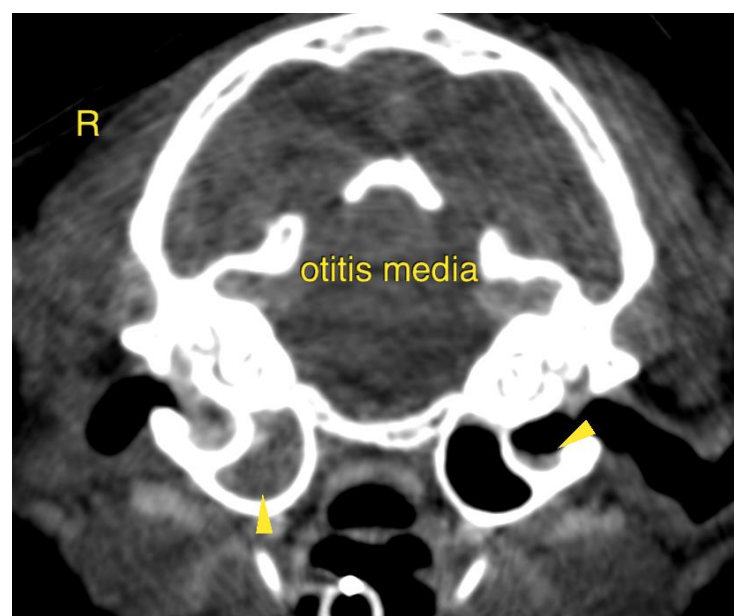
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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