



PATIENT

BJ Poet

PRESENTING CLINICAL SIGNS

Patient has had two episodes in which he seemed disoriented and had a hard time walking. Owner says he was walking sideways when these episodes occurred. Not clear whether these were neurologic events or more weakness/syncope. Within 24 hours of the 2nd episode, patient developed labored breathing. This was 1 week ago. Patient has improved a little, but still displays increased inspiratory effort. History of IBD and has been on prednisolone chronically, 5mg Q 24h. Abnormal PE/Chem/CBC/UA Results: None.

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE THORAX

BREED

DSH

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

SEX

Neutered Male

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

13 Years

The heart is prominent and presents a mild banana-shape in the lateral projection. In the VD projection the pulmonary vessels are prominent.

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The lung parenchyma presents a generalized mild to moderate increased radiopacity, effacing the pulmonary vessels in the lateral projection. Thin pleural fissure lines are appreciated in the VD projection.

Multifocal mild to moderate peribronchial cuffing is noted.

HOSPITAL NAME

Q Street Animal
Hospital

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

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

Jessica Hoerauf

- Cardiomegaly with prominent pulmonary vessels
- Generalized unstructured interstitial lung pattern
- Possible very mild pleural effusion versus pleural thickening
- Mild bronchial pattern

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Due to the prominent cardiac silhouette and pulmonary vasculature, cardiomyopathy needs to be ruled out as course for the history of dyspnea and potential syncope/weakness by the means of a cardiac echo. The pulmonary pattern can indicate pulmonary edema in transition.

DATE

11-15-21

If cardiac disease can be ruled out, other potentials for the lung pattern include bronchitis and pneumonitis (infectious (viral, bacterial, parasitic, Mycoplasma) versus non-infectious), pulmonary fibrosis, neoplasia (e.g. lymphoma, carcinoma) are considerations. A BAL can be used as an advanced diagnostic test.



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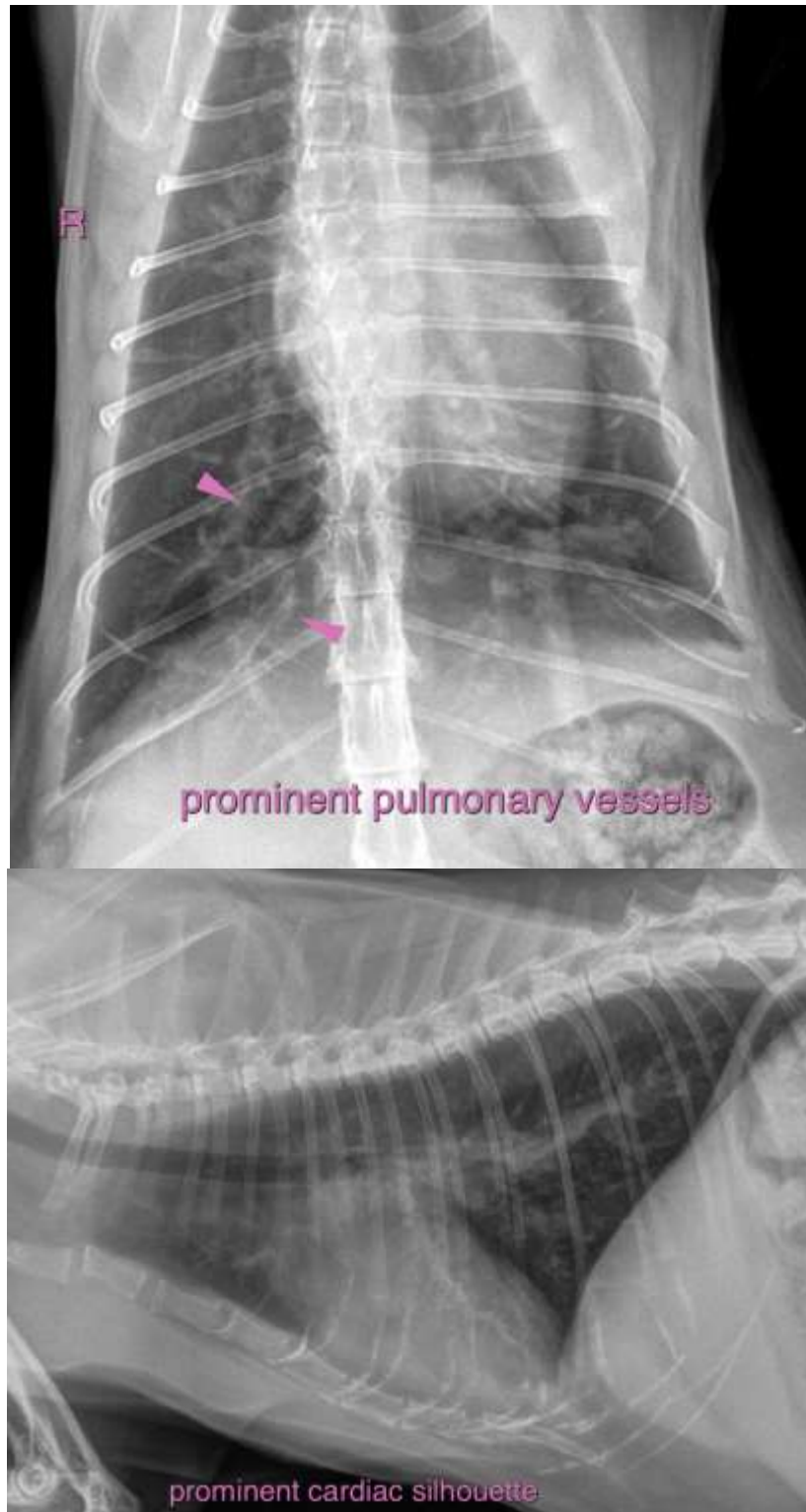
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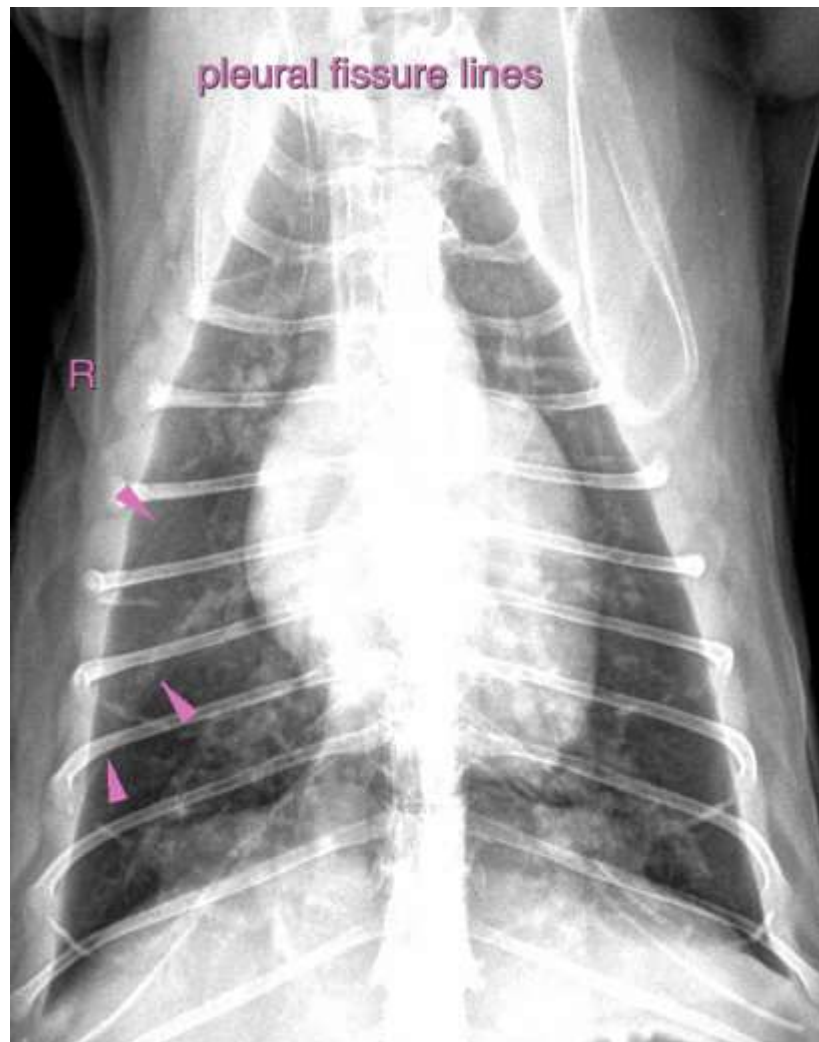
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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