



**PATIENT PRESENTING CLINICAL SIGNS**

Nelly Hiserodt Dry/honking, non-productive cough that has progressively worsened since spring 2022. Noticed mornings and after exercise. Patient is eating & drinking well otherwise.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: UA: Protein, Glucose & Ketones present. BW: RETIC 66.8 K/μL, NEU \* 10.83 K/μL, GLU 300 mg/dL, PHOS 2.8 mg/dL, K 3.2 mmol/L, FRU 349 μmol/L

Feline **RADIOGRAPHIC STUDY OF THE THORAX**

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

**BREED RADIOGRAPHIC FINDINGS**

DSH The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

**SEX** 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.

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

**AGE** Multifocal moderate peribronchial cuffing is appreciated. Mild mineralization of the bronchial walls is seen. The right middle lung lobe and the caudal part of the left cranial lung lobe are consolidated and present a decreased volume. The ribs are mildly diverging and there is a loss of the normal v-shaped thoracic conformation.

7 Years, 3 Months

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

**RADIOGRAPHIC DIAGNOSIS**

**HOSPITAL NAME**

POCONO PEAK  
VETERINARY  
CENTER

- Bronchial lung pattern
- Consolidated right middle lung lobe and caudal part of the left cranial lung lobe with decreased volume
- Suspect mild-air-trapping
- Suspect mild bronchomicrolithiasis – sequela to chronic bronchitis

**REFERRING VET**

Dr. Christine Coyle

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic changes are highly suggestive for underlying feline bronchial disease ('feline asthma') – commonly allergic in origin – with mild hyperinflation of the lung and likely resorption atelectasis of the right middle lung lobe and caudal part of the left cranial lung lobe – possibly due to mucus plugging of the left main bronchi or preceding chronic bronchopneumonia.

**INVOICE**

55307

**DATE**

11-21-22



**PATIENT**

Nelly Hiserodt

**SPECIES**

Feline

**BREED**

DSH

**SEX**

FS

**AGE**

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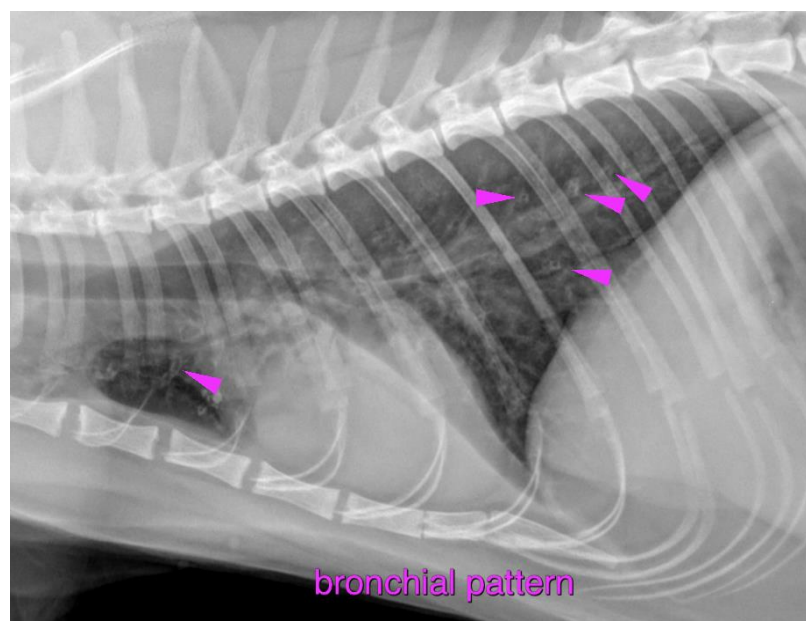
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**DATE**

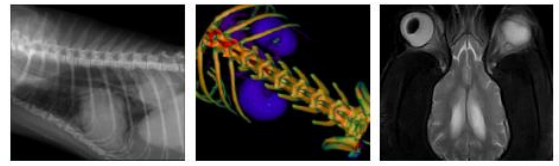
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consolidation right middle lung lobe & left cranial lung lobe



bronchial pattern



**PATIENT**

Nelly Hiserodt

**SPECIES**

Feline

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.

**BREED**

DSH

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

**SEX**

FS

**AGE**

7 Years, 3 Months

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