



**PATIENT**

Felix Holmes

**PRESENTING CLINICAL SIGNS**

Chronic FUR but now "Coughing or hacking". ( I did not see or hear these episodes in clinic) Non productive cough  
Abnormal PE/Chem/CBC/UA Results: TPR normal. No heart murmur and lung sounds normal.  
Indoor and outdoor acreage cat. All lymph nodes = normal.

**SPECIES**

Feline

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**BREED**

DLH

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**SEX**

The extrathoracic soft tissues present homogeneous without abnormalities.

MN

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The aortic arch is prominent. The pulmonary vasculature is within normal limits.

**AGE**

14 Years

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

**INTERPRETED BY**

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.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

**HOSPITAL NAME**

Lomsnes Veterinary  
Hospital

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.

**REFERRING VET**

Dr. Lisa Lomsnes

**RADIOGRAPHIC DIAGNOSIS**

- Mild redundancy of the aortic arch.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

49003

The radiographic study of the thorax presents without clinically relevant pathology explaining the described clinical signs. The soft tissue bulge level with the base of the heart is compatible with a redundant aortic arch. Be aware that negative radiographs do not rule out possible inflammatory lower airway disease completely.

**DATE**

12-13-21



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**REFERRING VET**

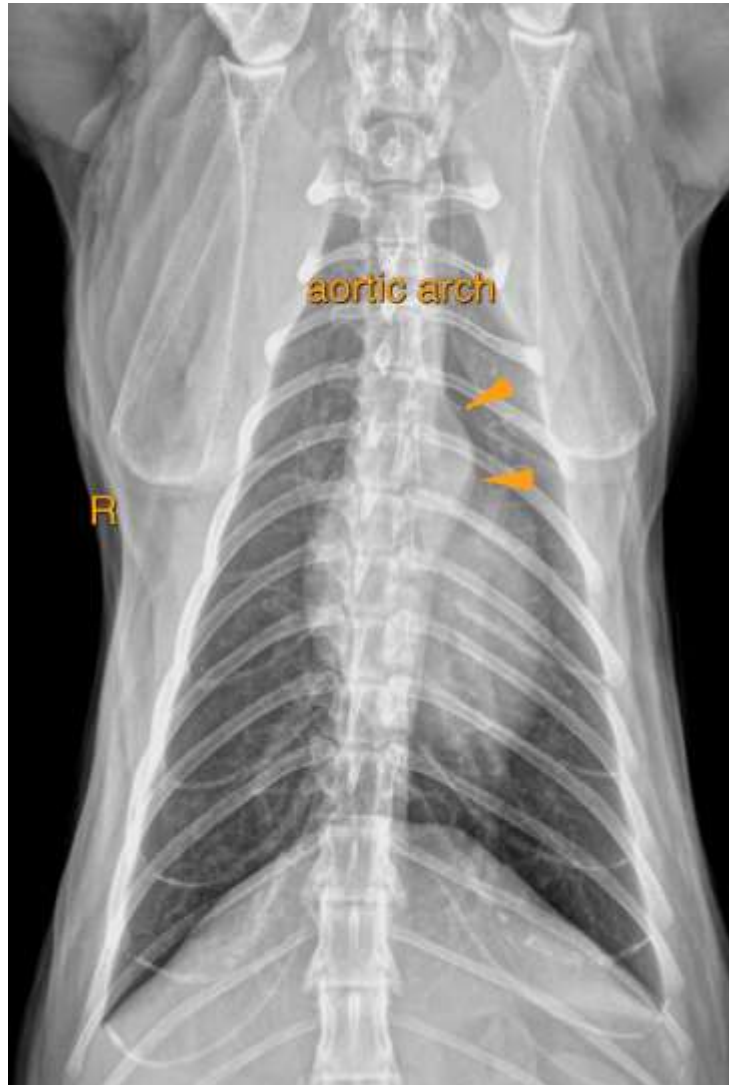
Dr. Lisa Lomsnes

**INVOICE**

49003

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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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