



PATIENT

Fen Hurley

PRESENTING CLINICAL SIGNS

Patient stopped eating 2 days previous and was whining when picked up. X-rays showed pleural effusion on the left cranial lung. Thoracentesis showed pyothorax and culture was submitted. Cytology in house showed neutrophils and some cocci

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: PHOS 8.7 CBC showed large amount of Lymphocytes and Monocytes. Manual Diff was within normal range

COMPUTED TOMOGRAPHY OF THE THORAX

BREED

Maine Coon

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

COMPUTED TOMOGRAPHIC FINDINGS

A chest tube is entering the left & right pleural cavity by the 8th intercostal space bilaterally.

SEX

MN

In the pleural cavity, a moderate amount of gravity dependent, non-contrast enhancing soft tissue material is visible as well as a mild to moderate amount of free gas. The lung lobes are retracted from the thoracic wall and present a reduced volume. The ventral dependent aspects of the lung are consolidated with a reduced volume and air-bronchograms.

AGE

6 Months

The sternal lymph nodes are moderately enlarged, rounded, uniform soft tissue attenuating and contrast enhancing. The cranial mediastinal lymph nodes are prominent. Post contrast administration, a significant thickening of the pleural lining is appreciated, most accentuated in the ventral aspects of the pleural cavity.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

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

HOSPITAL NAME

Mountain West
Veterinary Hospital

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate pleural effusion and mild to moderate pneumothorax
- Advanced pleuritis, L>R
- Lymphadenopathy sternal & cranial mediastinal lymph nodes
- Secondary compression atelectasis ventral dependent aspects of the lung

REFERRING VET

Jeff Simmons

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An underlying cause for the already diagnosed pyothorax is not appreciated. Consider a small perforating trauma to the pleural cavity as a potential underlying cause or translocation of bacteria from preceding pneumonia. A migrating foreign body is a consideration, although no foreign material is appreciated by CT. Thoracic catheters were already placed to flush the pleural cavity. If clinical signs are refractory to conservative therapy, surgical intervention to explore the pleural cavity and check for any foreign material.

INVOICE

48994

DATE

12-13-21

The pneumothorax is considered iatrogenic, due to placement of the chest tubes.



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pleuritis
enlarged sternal LNs



atelectasis



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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.

SPECIES

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