



PATIENT

Paige Atkinson

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

18

WEIGHT

4.03kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Jessica Morgan RVT

HOSPITAL NAME

Oxford County
Veterinary Clinic

REFERRING VET

Paisley Canning

INVOICE

73962

DATE

2-25-26

PRESENTING CLINICAL SIGNS

- 18 year old FS cat
- -history of nasal discharge, heart murmur, stage 2 kidney disease and hyperthyroidism
- BNP is 288, and t4 1 week ago was 81 -> did increase methimazole dose in response
- -eating well, didn't improve with antibiotics - concerned about allergic airway, and/or CPE, other, looking for reason for lethargic and nala discharge

Abnormal PE/Chem/CBC/UA Results: IDEXXSDMA a 18.0 - 14 µg/dL H 12.12 Creatinine b 214.80 - 203 µmol/L H 207.227 Urea (BUN) 23.0 5.7 - 13.2 mmol/L H 26.5 21.8 Total T4 a 82.3 10.0 - 60.0 nmol/L Cardiopet proBNP (Feline) c 288 0 - 100 pmol/L

RADIOGRAPHIC STUDY OF THE THORAX

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

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneously without abnormalities.

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.

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.

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.

RADIOGRAPHIC DIAGNOSIS

- Normal thorax

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax reveals no abnormalities. The cardiovascular structures are within normal limits; anyway complementing workup by a cardiac echo would be ideal to screen for underlying cardiomyopathy.

TECHNICAL COMMENTS

Human fingers are seen in the primary beam, please consider radiation safety guidelines!



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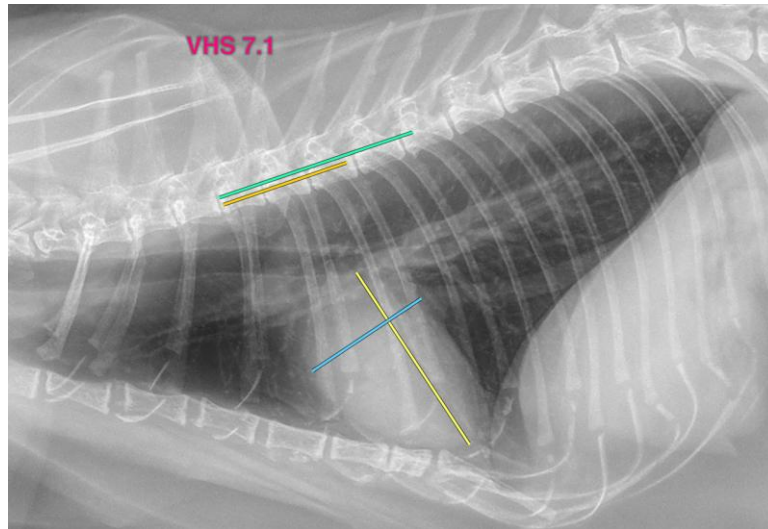
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@sonopath.com