



**PATIENT PRESENTING CLINICAL SIGNS**

Lola Owen  
 Chronic history of wheezing daily at home mostly when work up or purring loudly. Owner reports will wheeze and open mouth breath during these events. History of concern for possible pulmonary edema (after anesthesia, x-rays from 11/9/17) and HCM in 2017 (x-rays from 11/30/17, sonopath report invoice 54259). ECHO in Jan 2021 with no concerns. X-rays from 1/18/21 with mild bronchial pattern noted (sonopath report invoice 43868). Owners think possible improvement with steroid therapy. Sending all chest x-rays for comparison. Submitting abdominal x-rays for recent history of chewing on blanket. Owner fed 4 pill pockets to give Gabapentin for exam (fractious cat). Vomiting once a week. History of vomiting  
 Abnormal PE/Chem/CBC/UA Results: Wheezing noted on exam. No heart murmur

**SPECIES**

Feline

**BREED**

Calico

**RADIOGRAPHIC STUDY OF THE THORAX&ABDOMEN**

**SEX**

A complete set of radiographs of the thorax and abdomen is provided for review. Images are compared to the images dated 1/18/21.

FS

**RADIOGRAPHIC FINDINGS**

**AGE**

Thorax

4 Years, 10 Months

The surrounding bony structures are within normal limits.

**INTERPRETED BY**

The extrathoracic soft tissues present homogeneous without abnormalities.

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

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.

**HOSPITAL NAME**

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.

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 Hospital

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

**REFERRING VET**

Stationary generalized mild peribronchial cuffing is present.

Dr. Alyssa Taplett

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**INVOICE**

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

51022

Abdomen

**DATE**

The surrounding bony structures are within normal limits.

3-18-22

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.



**PATIENT** The liver is appropriate in position, size and presents uniform opacity.

Lola Owen The splenic head is in the anticipated position and within normal limits for size and opacity.

**SPECIES** Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

Feline The stomach is in its anticipated position and presents normal content.

**BREED** The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

Calico The colon is seen in the expected position and presents with appropriate content.

**SEX** **RADIOGRAPHIC DIAGNOSIS**

- FS
- Stationary bronchial lung pattern without evidence of air-trapping
  - Normal abdomen

**AGE** **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

4 Years, 10 Months The stationary bronchial pattern indicates feline bronchial disease ('feline asthma') lower inflammatory airway disease. Complementing therapy by an asthma inhaler might be beneficial.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

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**REFERRING VET**

Dr. Alyssa Taplett

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**DATE**

3-18-22



**PATIENT**

Lola Owen

**SPECIES**

Feline

**BREED**

Calico

**SEX**

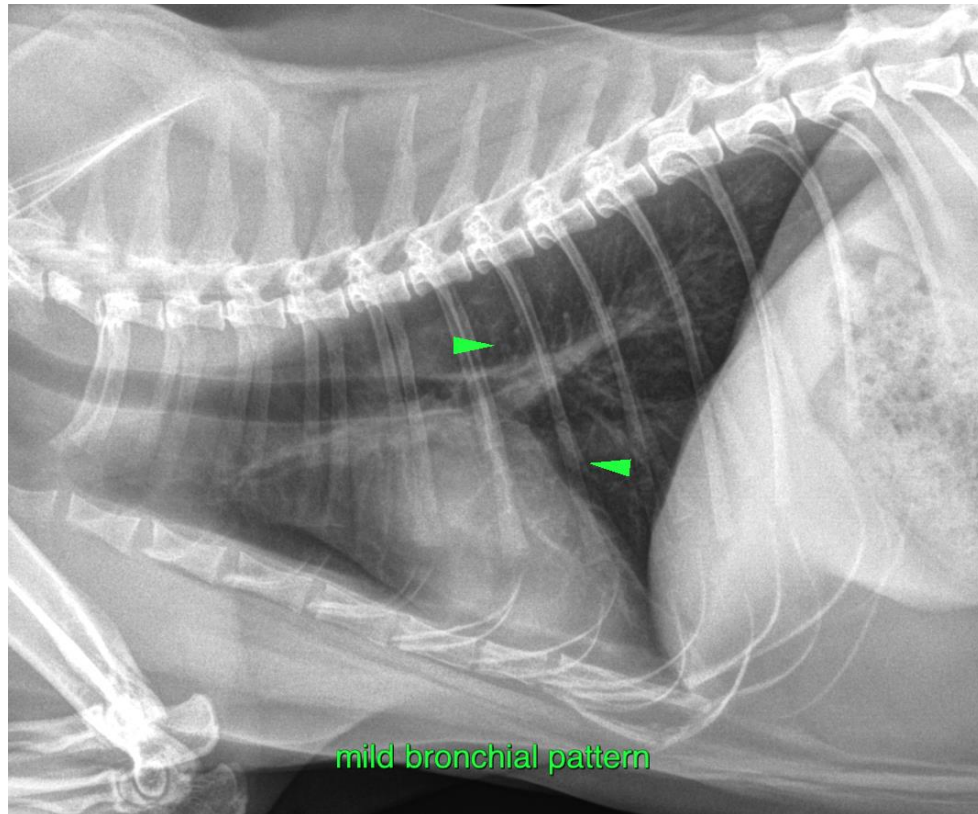
FS

**AGE**

4 Years, 10 Months

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI



**HOSPITAL NAME**

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Hospital

**REFERRING VET**

Dr. Alyssa Taplett

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**DATE**

3-18-22

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.

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