



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Meeko Perkel  
**SPECIES** Feline  
**BREED** DSH  
**SEX** NM  
**AGE** 13 Years, 9 Months

Rechecking: Weak/not eating History: Meeko, a 13 yr old neutered male Domestic Shorthair presents today for not eating and weak. P was supposed to get mass removal surgery tmr but cancelled due to P not acting right. O noticed P wasn't acting right on Monday. P is a finicky eater but always eats his canned food in the mornings, now he won't go near it. P is also acting very sensitive and weak, not jumping up on counters and being his usual self. P is indoor only.  
 Abnormal PE/Chem/CBC/UA Results: Exam Notes: thin with moderate peripheral muscle loss ~2cm diameter round ulcerated dermal lesion right flank mild dental calculus, minimal gingivitis tachycardia with increased/harsh lung sounds and increase in respiratory rate with stress  
 Diagnostics & Testing: thoracic radiographs assessment: dermal neoplasia diffuse patchy/fluffy bronchointerstitial pattern all lung fields- metastasis vs bronchitis vs lower airway disease/asthma Treatment Plan: continue oral antibiotics as prescribed new rx- elura 2mg/kg PO SID prednisolone 1mg/kg PO SID for 5 days then EOD for 5 doses

**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 homogeneous 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.

Multifocal moderate peribronchial cuffing is seen.

In the caudodorsal lung field, level with the 9<sup>th</sup> and 10<sup>th</sup> intercostal space, mild ill-defined small (<3.5 mm) nodular soft opacities are seen.

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

**RADIOGRAPHIC DIAGNOSIS**

- Bronchial lung pattern without signs of air-trapping
- Nodular appearing soft tissue opacities, caudodorsal lung field

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The bronchial lung pattern is highly suggestive for underlying feline bronchial disease – commonly primary allergic in origin ± bacterial superinfection. Theoretically bronchogenic carcinoma may present with a bronchial pattern as well. The nodular soft tissue opacities are likely a sequela to accumulation of secret in the lumen of peripheral bronchi, the odds for pulmonary nodular parenchymal lesions (e.g. metastasis) are considered low.

**INVOICE**

57073

**DATE**

3-4-23

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
 Hospital

**REFERRING VET**

Dr. Loduca



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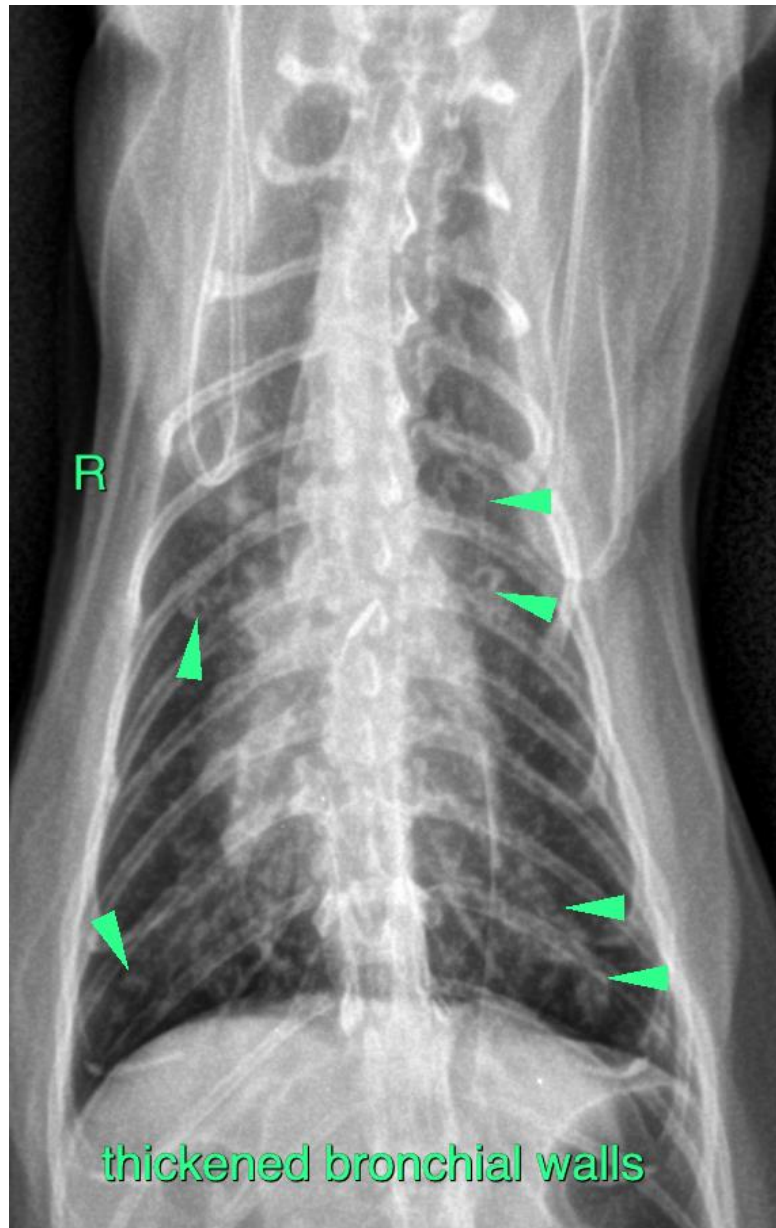
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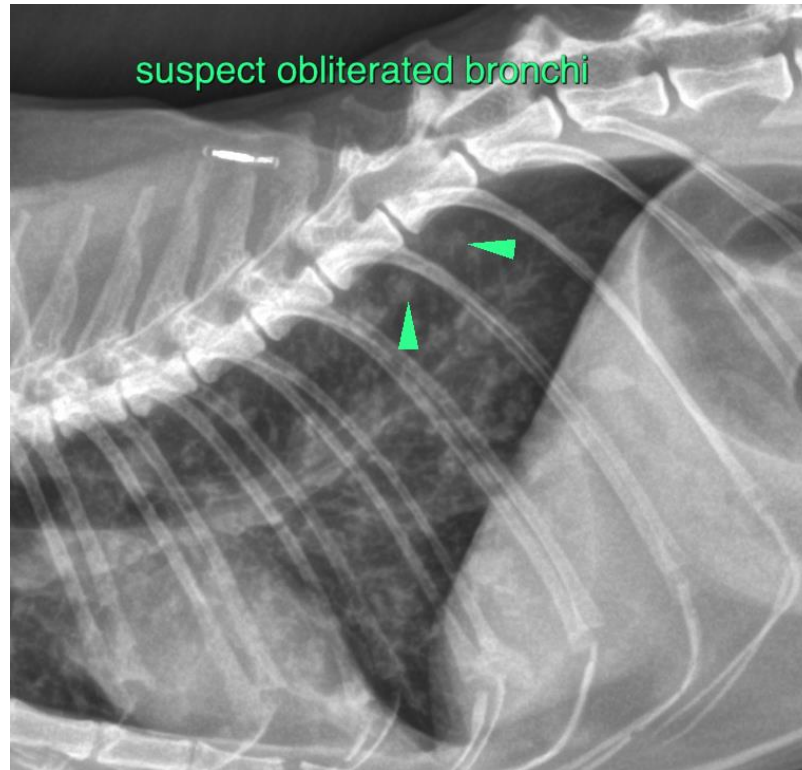
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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