



PATIENT

Milo Kozel

SPECIES

Feline

BREED

DMH

SEX

MN

AGE

8Y

WEIGHT

10.9lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Sydney Thorson

HOSPITAL NAME

Gentle Doctor Animal
Hospital

REFERRING VET

Sydney Thorson

INVOICE

74640

DATE

4-16-26

PRESENTING CLINICAL SIGNS

-Presented 4/12 to emergency for inappetence and lethargy , basic chemistry WNL, abdominal radiographs showed mild constipation, sent home with onsiar and gabapentin
-Presented 4/16 for continued inappetence and lethargy
Abnormal PE/Chem/CBC/UA Results: Abdominal effort with breathing Tachypneic - 80 breaths per minute Temperature normal at 100°F

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 cardiac silhouette is elongated and has a valentine shape in the VD projection.

The lung parenchyma presents a diffuse irregular ground glass opacity, partially effacing the pulmonary vasculature. In the pleural space a small amount of soft tissue opaque material is appreciated.

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.

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

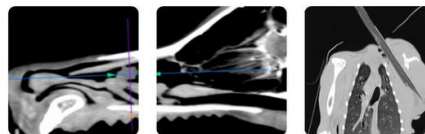
The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

RADIOGRAPHIC DIAGNOSIS

- Cardiomegaly
- Significant diffuse unstructured interstitial lung pattern
- Mild pleural effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are highly suggestive for decompensated cardiomyopathy – hypertrophic cardiomyopathy is most common – and secondary cardiogenic pulmonary edema and pleural effusion. Complementing workup by a cardiac echo is advised.



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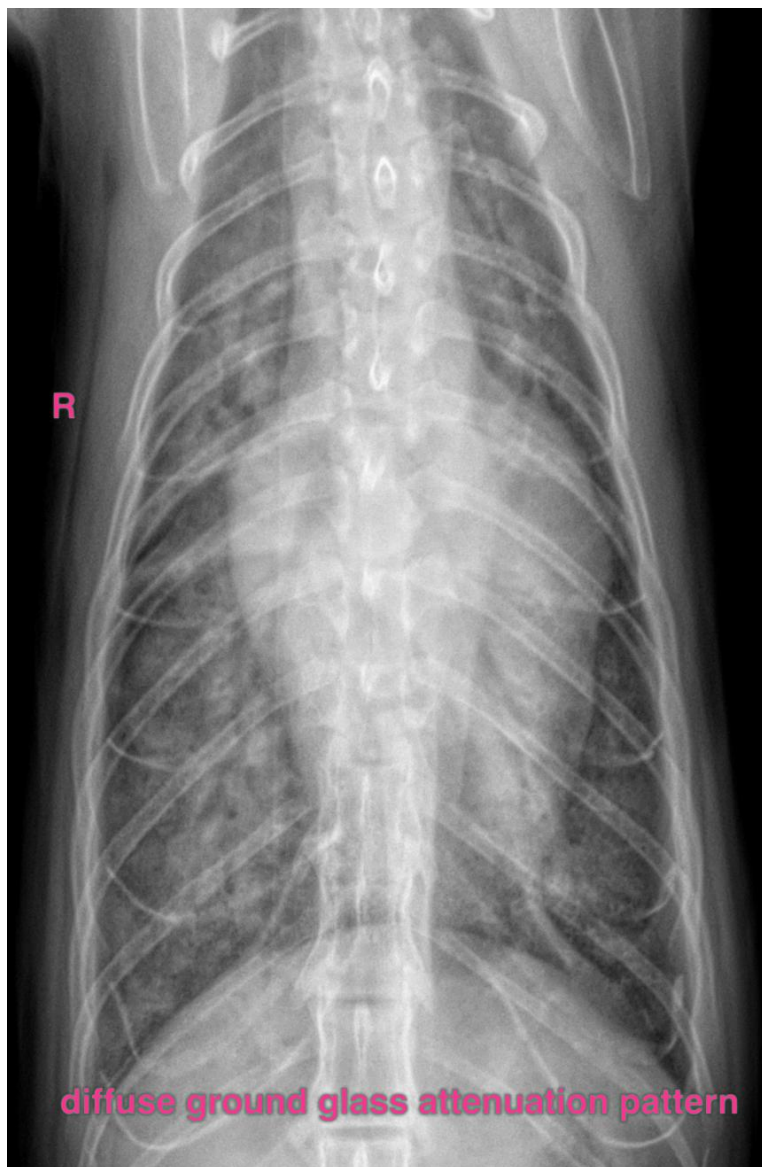
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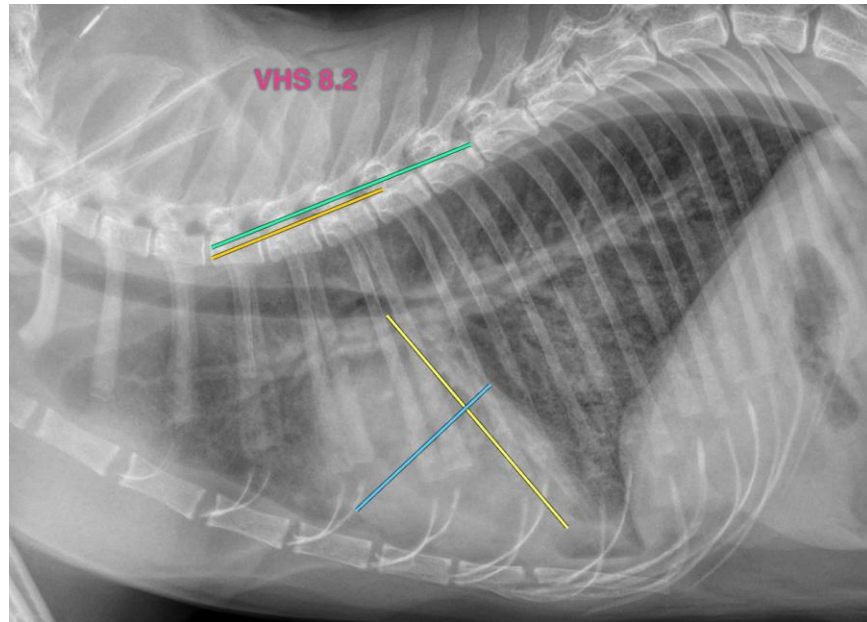
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@sonopath.com