



## PATIENT

Boots Babcock

## SPECIES

Feline

## BREED

DSH

## SEX

Female Spayed

## AGE

12

## WEIGHT

4.6

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Natalie Smith RVT

## HOSPITAL NAME

Oxford County  
Veterinary Clinic

## REFERRING VET

Dr. Amy Lynes

## INVOICE

75243

## DATE

6-1-26

## PRESENTING CLINICAL SIGNS

Approx 12yo FS DSH adopted ~2yrs ago, age is a complete estimate. Has been "upper resp-y" since adopted, with occ sneezing and occ mucoid nasal discharge bilaterally. Presented 6/1/26 due to 1-2 minute long episodes of coughing occurring 5-6 times per day for the last 2 weeks. Cough sounds dry and wheezing, like a hairball, but nothing comes up. Patient is eating/drinking/urinating/defecating normally. Has lost weight from 5.3kg (7/25/25), 4.88kg (12/29/25), to 4.6kg today (6/1/26). Abnormal PE/Chem/CBC/UA Results: Eupneic, lungs quiet no crackles/wheezing. No coughing in appt. Did have mild mucoid nasal discharge, not audibly congested. No heart murmur.

## 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 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.

Generalized moderate thickening of the walls of the bronchial tree is appreciated. The left cranial lung lobe is consolidated. In the caudodorsal aspect of the right caudal lung lobe, a multilobulated soft tissue opacity is seen – presenting an overall tubular appearance of its components.

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

## RADIOGRAPHIC DIAGNOSIS

- Bronchial lung pattern without air-trapping
- Multilobulated tubular soft tissue mass(es) caudodorsal aspect right caudal lung lobe
- Consolidated left cranial lung lobe with decreased volume

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are most consistent with feline bronchial disease, commonly primary allergic in origin ± bacterial or viral superinfection. The consolidated left cranial lung lobe can be a sequela to bronchial mucus plugging and secondary resorption atelectasis, differentials would include an intraluminal, mural or extramural mass compressing the first degree bronchus (e.g. granuloma, neoplasia), bronchial foreign body, chronic lung lobe torsion (unlikely).

The lobulated soft tissue opacification in the dorsal aspect of the right caudal lung lobe is most suggestive for bronchiectasis along with mucus plugging.

In few cases the bronchial pattern can be caused by bronchogenic carcinoma.



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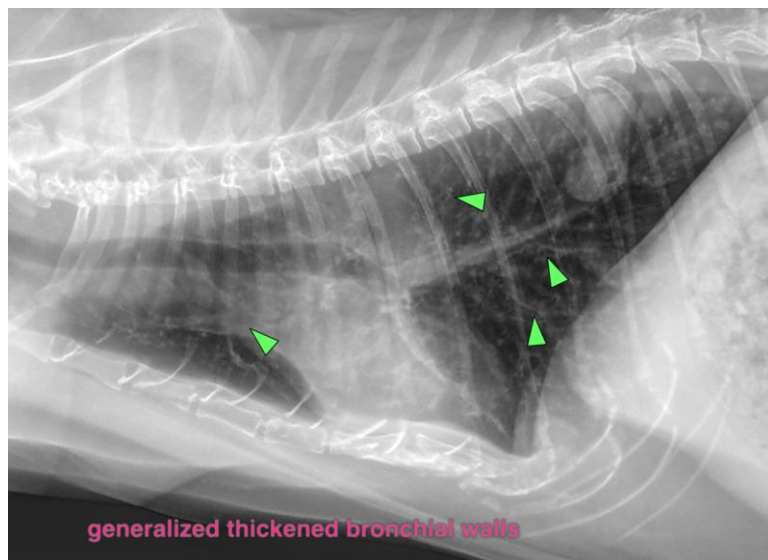
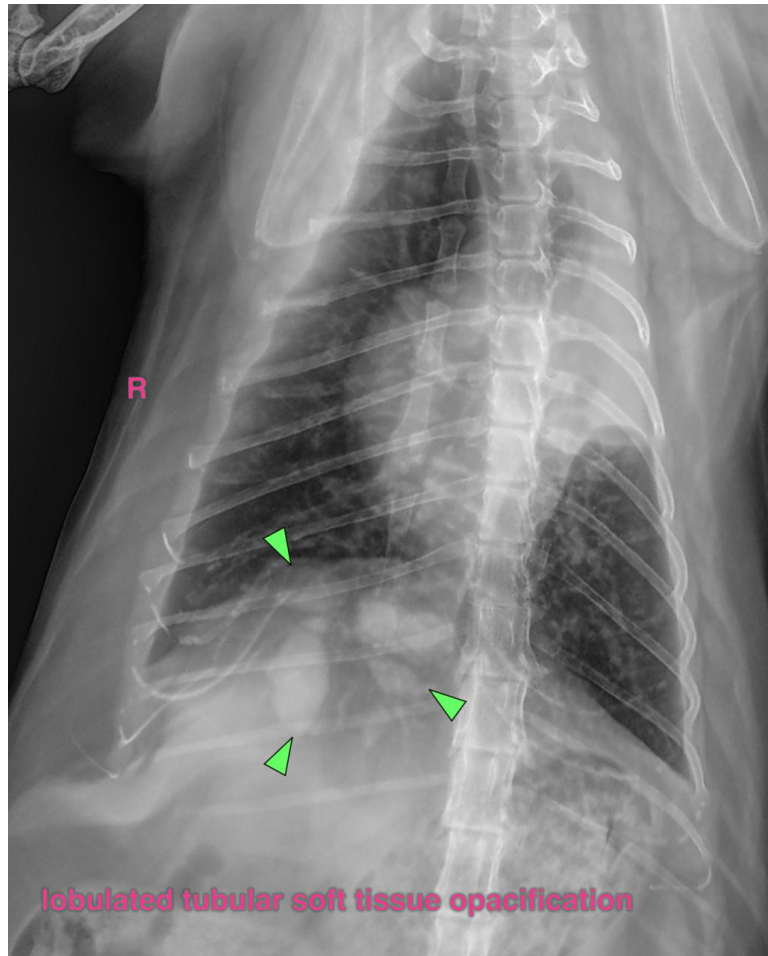
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)