



**PATIENT PRESENTING CLINICAL SIGNS**

Sally Causton  
4 weeks history of coughing and shallow breathing  
Abnormal PE/Chem/CBC/UA Results: unremarkable

**SPECIES RADIOGRAPHIC STUDY OF THE THORAX**

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

**RADIOGRAPHIC FINDINGS**

**BREED**  
The surrounding bony structures are within normal limits.

DSH  
The extrathoracic soft tissues present homogeneous without abnormalities.

The cardiac silhouette is prominent. The pulmonary vasculature is within normal limits.

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

Female Spayed  
The bronchial walls are mildly thickened.

**AGE**  
5 Years  
In the VD view, level with the 4<sup>th</sup> intercostal space, superimposed on the left caudal lung lobe, a roundish, mild ill-defined, soft tissue opacity is seen, measuring approximately 0.8 times the width of the respective intercostal space in diameter. The nodular lesion of the left cranial lung lobe is not appreciated in the lateral projection. The remainder of the lung parenchyma present the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

**RADIOGRAPHIC DIAGNOSIS**

- Suspect pulmonary nodular lesion left cranial lung lobe
- Mild bronchial pattern
- No evidence of air-trapping

**HOSPITAL NAME**

St. Catherine's Animal  
Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET**

Dr. Boctor

The nodular soft tissue opacity of the left cranial lung lobe is suggestive for region of round pneumonia, granuloma or zone of dystelectasis – possibly as a sequela to feline bronchial disease ± bacterial superinfection, would explain the mild bronchial pattern. A differential for the nodular lung lesion is neoplastic disease, but the odds are considered low.

**INVOICE**

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A differential for the bronchial pattern is primary infectious bronchitis – viral, bacterial, parasitic, protozoal.

Recommend empirical management - starting with a clinical trial with Doxycycline appears ideal. Follow up radiographs can be used to check if the nodular lesion is regressive under therapy.

**DATE**

7-9-22

The cardiomegaly is very likely a subjective impression, however a cardiac echo might be used to rule out underlying cardiomyopathy entirely.



**PATIENT**

Sally Causton

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Female Spayed

**AGE**

5 Years

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**HOSPITAL NAME**

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**REFERRING VET**

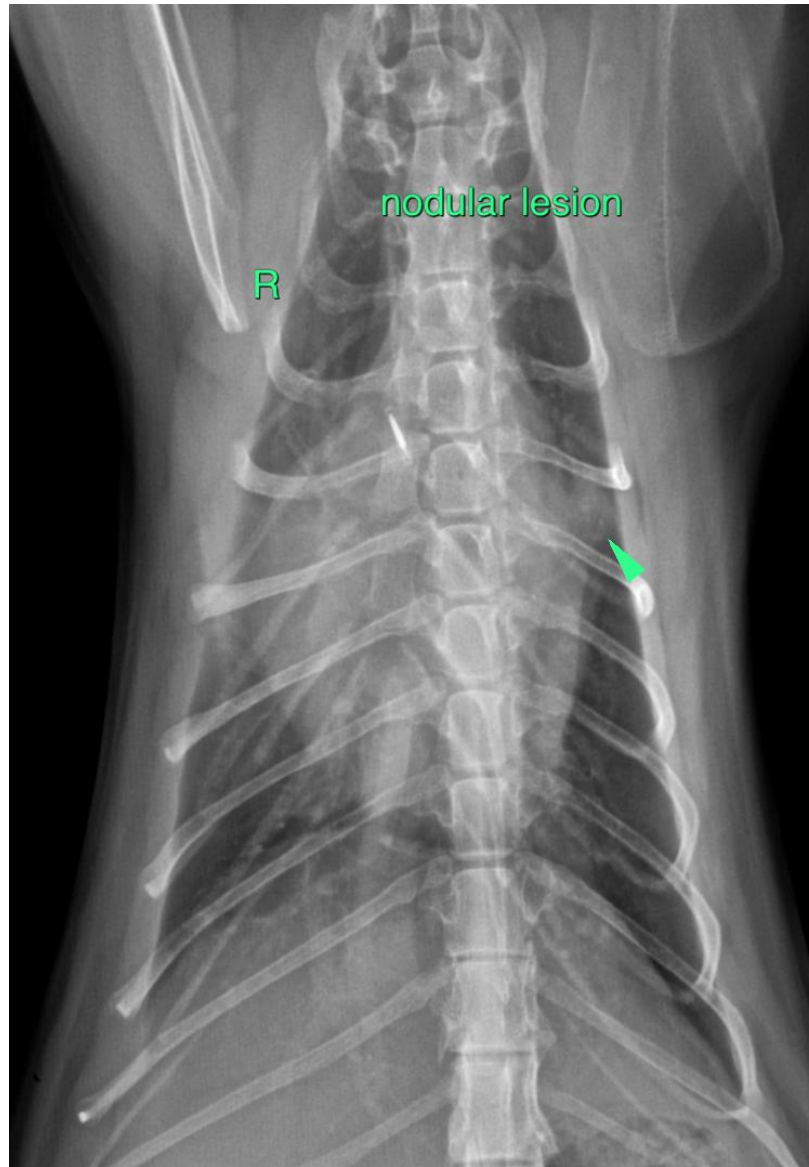
Dr. Boctor

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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.

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