



**PATIENT PRESENTING CLINICAL SIGNS**

Ripley Lara History: P presented for URI signs, coughing. On exam approximately 2x3cm mammary tumor appreciated on cranial most mammary gland of L chain. Harsher than normal lung sounds in all fields, slightly increased resp effort with abdominal effort.

**SPECIES**

Abnormal PE/Chem/CBC/UA Results:

Feline

**RADIOGRAPHIC STUDY OF THE THORAX**

**BREED**

A complete set of radiographs of the thorax is provided for review.

**DSH**

**RADIOGRAPHIC FINDINGS**

The body condition score is 8/9.

**SEX**

Spayed Female

One mammary complex, at the caudoventral aspect of the thorax is prominent with an enlarged nipple. The extrathoracic soft tissues present homogeneous without abnormalities.

**AGE**

14 Years

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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

A generalized mild to moderate thickening of the bronchial walls is noted.

The lung parenchyma presents the expected architecture and mild increased radiopacity due to the nutritional status; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**HOSPITAL NAME**

Grove Veterinary  
Clinic

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

**RADIOGRAPHIC DIAGNOSIS**

**REFERRING VET**

Dr.Pospichal

- History of mammary mass
- Bronchial lung pattern without evidence of air-trapping
- Obesity

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

13353

The bronchial lung pattern is compatible with bronchitis, the top differential is feline inflammatory lower airway disease ± bacterial superinfection. Primary infectious bronchitis – bacterial, viral, parasitic – is a consideration as well. Consider a clinical trial with antimicrobial drugs ± combination with an asthma inhaler for long term treatment. The finding explains the described clinical signs.

**DATE**

9/29/21



**PATIENT**

Ripley Lara

No pulmonary metastatic disease is appreciated, although bronchogenic carcinoma can present with a bronchial pattern as well – but this is considered less likely.

**SPECIES**

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**BREED**

DSH

**SEX**

Spayed Female

**AGE**

14 Years

**The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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