



PATIENT

Violet Antosh

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

9Y

WEIGHT

3.73kg

INTERPRETED BY

Tilde Rodrigues Froes,
DMV, MSc., Dr. Med
Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

RVTs

HOSPITAL NAME

Woodridge Veterinary
Clinic

REFERRING VET

Dr. Breanne
Couperthwaite

INVOICE

72787

DATE

11-27-25

PRESENTING CLINICAL SIGNS

Violet presented today for annual exam & Vx. O mentioned that she occasionally gets an URT infection for a few days and then it goes away. Symptoms include sounding congested, sneezing, and clear nasal discharge. O said that lately it seems like she is congested more often. No panting/open mouthed breathing, or increased resp. effort that O has noticed.

Abnormal PE/Chem/CBC/UA Results: PE: Sounds congested in upper airways. No nasal discharge on exam today. No wheezes or crackles on auscultation but can hear referred sounds from upper airways. Also increased respiratory effort/abdominal push while breathing. No heart murmur or arrhythmia on auscultation. Moderate periodontal ds. Moderate dandruff throughout haircoat. Bloodwork not performed at this time.

RADIOGRAPHIC STUDY OF THE THORAX

Radiographs of the thorax in two imaging planes are provided for review totaling 3 images. One right lateral, one left lateral and one ventrodorsal view.

RADIOGRAPHIC FINDINGS

There is a diffuse, mild bronchial pattern throughout the pulmonary parenchyma.

A region of alveolar opacification is present in the right middle lung lobe, resulting in border effacement of the right cardiac silhouette and a mild ipsilateral shift of the cardiac silhouette/mediastinum.

The cardiac silhouette is normal in size and contour on the lateral projections. The pulmonary vasculature is within normal limits.

The pleural space is unremarkable, with no evidence of effusion or pneumothorax.

The mediastinum, aside from rightward displacement.

No significant abnormalities are identified in the collimated cranial abdomen or visualized osseous structures.

RADIOGRAPHIC DIAGNOSIS

- Diffuse, mild bronchial lung pattern with alveolar foci and reduced volume expansion in the topographic region of the right middle lung lobe. Differential diagnoses include mild chronic bronchitis, inflammatory or infectious bronchitis, and feline lower airway disease/feline asthma.
- The lesion in the right middle lung lobe may be associated with obstructive atelectasis secondary to mucus plugging, residual pulmonary fibrosis, less likely focal pneumonia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings demonstrate a diffuse, mild bronchial lung pattern with alveolar foci and reduced volume expansion in the topographic region of the right middle lung lobe. Differential diagnoses include mild chronic bronchitis, inflammatory or infectious bronchitis, and feline lower airway disease/feline asthma.



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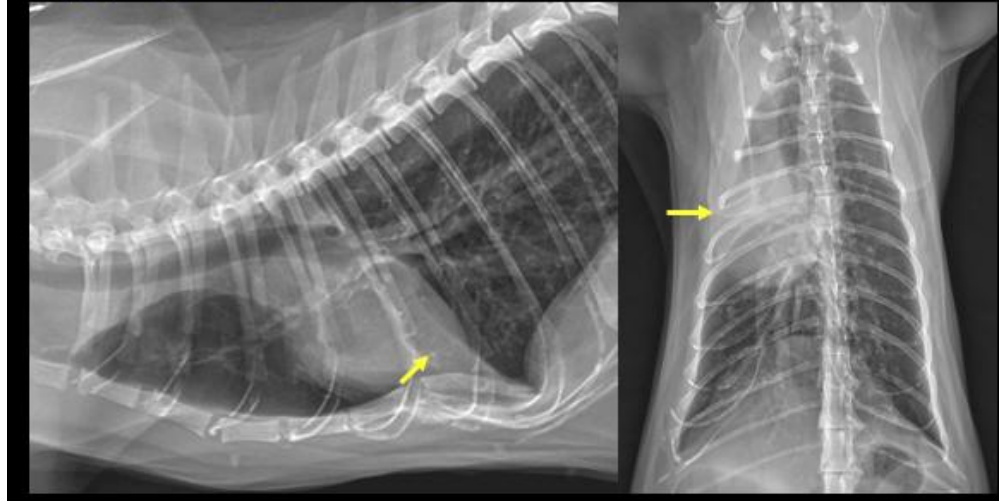
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For the findings in the right middle lung lobe consider as potential differential diagnosis include obstructive atelectasis secondary to mucus plugging, residual pulmonary fibrosis, less likely focal pneumonia.

Diffuse, mild bronchial lung pattern with alveolar foci and reduced volume expansion in the topographic region of the right middle lung lobe



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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.

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