



**PATIENT**

Tequila Reid

**PRESENTING CLINICAL SIGNS**

sudden coughing started one day ago  
 Abnormal PE/Chem/CBC/UA Results: bilateral ocular discharge , periodontal disease grade4/4 , heart murmur grade4/6 , bloodwork mild elevated protein and glucose, rest WNL

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

R and L lateral dogogram, 1x VD thorax

**BREED**

Chihuahua

**RADIOGRAPHIC FINDINGS**

The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity.

L6/7 show a reduced disc space, sclerotic end plates and spondylosis. Severe periapical lysis affects one mandibular molar 1 tooth.

**SEX**

Female

The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery. On the VD view the main stem bronchi appear to be displaced slightly laterally.

**AGE**

13 Years

The cranial mediastinum is of physiological size and opacity. The trachea runs parallel to the thoracic vertebrae and the carina is level with the trachea.

**INTERPRETED BY**

Heike Rudolf, DVM,  
 Dr. med. Vet.,  
 DipECVDDI DVR

The cardiac silhouette occupies 85% of the chest height and 3.5 intercostal spaces. The caudal heart border is straight.

**RADIOGRAPHIC DIAGNOSIS**

- Mild L sided cardiomegaly
- Incidental findings
- Periapical lysis mandibular M1
- Discopathy L3/4, chronic

**HOSPITAL NAME**

St. Catherine's Animal Hospital

**REFERRING VET**

Dr. Masoud

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mild cardiac enlargement is most likely the result of mitral endocardiosis and regurgitation.

Tracheal or bronchial collapse may coexist. Tracheal in combination with bronchial collapse is usually caused by chondromalacia and is thus due to an altered cartilage development which may go unnoticed until physical circumstances (such as stress, running, excitement) or disease (e.g. pneumonia, bronchitis, L cardiac enlargement) reduces the ease of airflow.

**INVOICE**

48581

Echocardiography to assess mitral valve and L atrial size as well as bronchoscopy to obtain a BAL is recommended. Should an underlying disease be present treatment may improve the clinical signs.

**DATE**

11-26-21



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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.

**SPECIES**

Canine

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
Dr.H.Rudorf@gmail.com

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