



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Zeus Garcia History: P is here to update vaccines. (rabies/ dhpp) O says P has an eye infection she is applying an ointment, so P is doing better also P acts like he is about to vomit but never really vomits Gastritis R/O F.B vs pancreatitis vs others

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Diag- Cre 1.4, BUN 28

**Canine RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN**

**BREED** The body condition score is 7/9. Most of the fat is located in the subcutaneous tissue rather than in the abdominal cavity.

**Bulldog** A mild lordosis is present at T8-10.

**SEX Thorax**

**Neutered Male** 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 right pulmonary artery is larger than rib 9 with its intersection on the VD view; after branching, the two components seem to terminate in a cone shaped fashion. The vessels for the cranial lobes appear physiological. The bronchial tree is thin walled and tapers uniformly towards the periphery.

**AGE**  
1 Year

The cranial mediastinum is of physiological size and opacity. The trachea runs parallel to the thoracic vertebrae and dips slightly at the carina. A thymic sail sign is just evident in the left cranial mediastinum.

**INTERPRETED BY**

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

The cardiac silhouette occupies 85% of the chest height and 3.5 intercostal spaces (VHS 11.5). No chamber or outflow tract enlargement is evident.

**Abdomen**

**HOSPITAL NAME**

Animal Paradise  
Hospital

The abdominal detail is good; diaphragm and abdominal wall are intact.

Liver and spleen appear physiological.

**REFERRING VET**

Dr. Mostafa Elshafie

The stomach is moderately filled with a mainly fluid and air, as well as some solid material; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a small amount of fecal matter.

Both renal shadows are not clearly delineated. The bladder is located in the abdominal cavity and contains a small amount of homogeneous fluid opacity.

**INVOICE** The sublumbar region appears physiological.

14068 **RADIOGRAPHIC DIAGNOSIS**

**DATE**

2/24/22



**PATIENT** • Possible pulmonary artery enlargement

Zeus Garcia

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SPECIES**

Canine

In bulldogs, gastro-esophageal reflux can be caused by a sliding hiatal hernia. The resulting inflammation will be visible in the terminal esophagus, thus esophagoscopy is recommended. Renal dysplasia should be ruled out thus ultrasound is recommended.

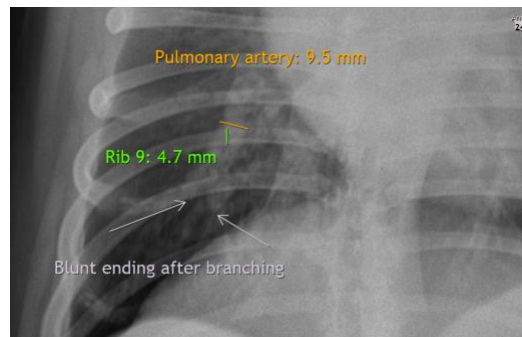
The impression of caudal pulmonary artery enlargement may be incidental but could be associated with parasites (e.g., dirofilaria) or pulmonary hypertension.

**BREED**

Bulldog

**SEX**

Neutered Male



**AGE**

1 Year

**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.**

**INTERPRETED BY**

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

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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dr.h.rudorf@gmail.com

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Animal Paradise  
Hospital

**REFERRING VET**

Dr. Mostafa Elshafie

**INVOICE**

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