



## PATIENT

Jackson Moore

## SPECIES

Canine

## BREED

Miniature Poodle Mix

## SEX

Neutered Male

## AGE

11 Years

## WEIGHT

12 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

CJ, MN

## HOSPITAL NAME

The Collegeway Animal  
Hospital

## REFERRING VET

Dr. Ehab Hanna

## INVOICE

14327

## DATE

03/13/26

## PRESENTING CLINICAL SIGNS

hacking cough

trouble breathing

patient moved during VD - unable to repeat - we apologize for the inconvenience.

## RADIOGRAPHIC STUDY OF THE THORAX

R/L lateral and VD (nice and straight!) are provided, totaling three radiographs for interpretation.

2026-03-13

## RADIOGRAPHIC FINDINGS

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

The bony structures appear physiological.

The cranial mediastinum is of physiologic size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located level with T5/6. On the VD the left main stem bronchus appears to be cranially displaced.

The lung lobes are well expanded and extend to the thoracic boundaries. The vascular outlines are blurred and bronchial enhancement is present. A ground glass appearance affects the left caudal and the medial aspect of the right caudal lobe.

The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces. On the VD view the cardiac silhouette appears Valentine shaped with a round right side, obvious aortic and main pulmonary artery (MPA) segment as well as a plump left ventricular tip.

## RADIOGRAPHIC DIAGNOSIS

- Generalized interstitial pattern, moderate
- Suspected cardiomegaly

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Possible differential diagnoses for a moderate infiltrate include:

- Infection (bacterial, fungal e.g., candida, viral, Rickettsia, Spirochetes, parasitic e.g., angiostrongylus)
- Inflammation (allergic pneumonitis, eosinophilic bronchopneumopathy)
- Idiopathic fibrosis
- Tumor (e.g., lymphoma)
- Edema
- Diffuse hemorrhage

Fecal samples should be obtained to rule out parasites. Bronchoscopy with broncho-alveolar lavage is recommended and samples should be submitted for bacteriological and cytological examination.

Tracheal and bronchial collapse can be assessed during the same examination.

The cardiac changes are most obvious on the VD and may be coincidental. However, considering the pulmonary infiltrate echocardiography is recommended to rule out Cor pulmonale and mitral insufficiency.



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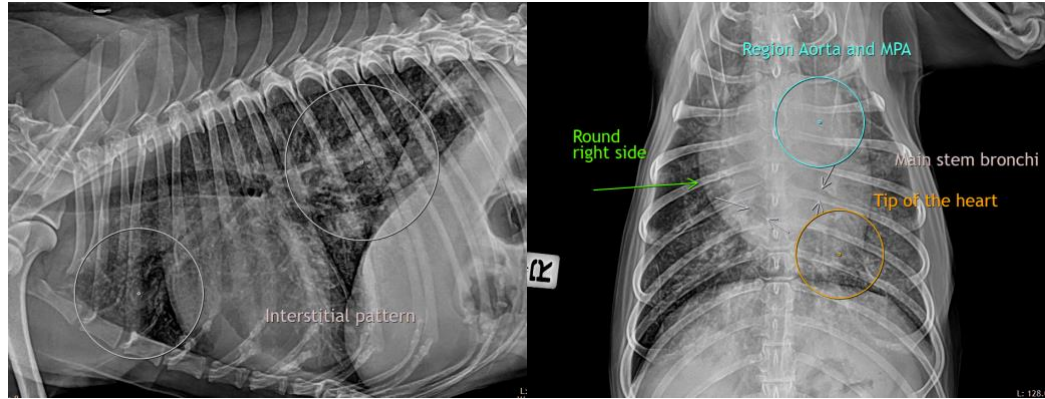
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Heike Rudolf, DVM, Dr. med. vet., DipECVDI, DVR  
[info@sonopath.com](mailto:info@sonopath.com)