



PATIENT PRESENTING CLINICAL SIGNS

Sydney Carlson Would like to pursue dental cleaning, growth removal. During annual exam, was more difficult to auscultate heart; no obvious murmur; pants more, but is overweight.

SPECIES RADIOGRAPH OF THE THORAX

Canine 2x RLR, 2x LLR, 1x DV

RADIOGRAPHIC FINDINGS

The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity.

BREED

Aust Shep Mix

Bridging new bone is located dorsal and ventral to numerous intersternbral spaces.

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 diaphragm is upright, and the right crus of the diaphragm crosses the body of T11. The bronchial tree is thin walled and the bronchus for the right cranial lobe only taper slightly towards the periphery. On the lateral views it appears larger than the left which is less obvious on the DV view.

AGE

11 Years

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5.

INTERPRETED BY

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

The cardiac silhouette is slightly elevated from the sternum by fat. It occupies 70% of the chest height and 2.5 intercostal spaces (VHS 11). No chamber or outflow tract enlargement is evident.

RADIOGRAPHIC DIAGNOSIS

- Possible bronchiectasis R cranial lobe
- Straight diaphragm
- Sternal new bone

HOSPITAL NAME

Gentle Doctor Animal Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no changes that would indicate metastases. Considering the BSC, the lungs are well aerated. Straightening of the diaphragm and wide bronchi suggest pulmonary pathology but no abnormal pattern has been identified. A large amount of abdominal fat, however, will hamper lung the caudal excursion of the diaphragm. If no crackles are present on auscultation and the dog does not appear dyspneic, anesthesia for dental cleaning and mass removal can be performed. Careful monitoring during recovery is, however, recommended.

REFERRING VET

Miranda Thomassen

INVOICE

50720

DATE

3-4-22



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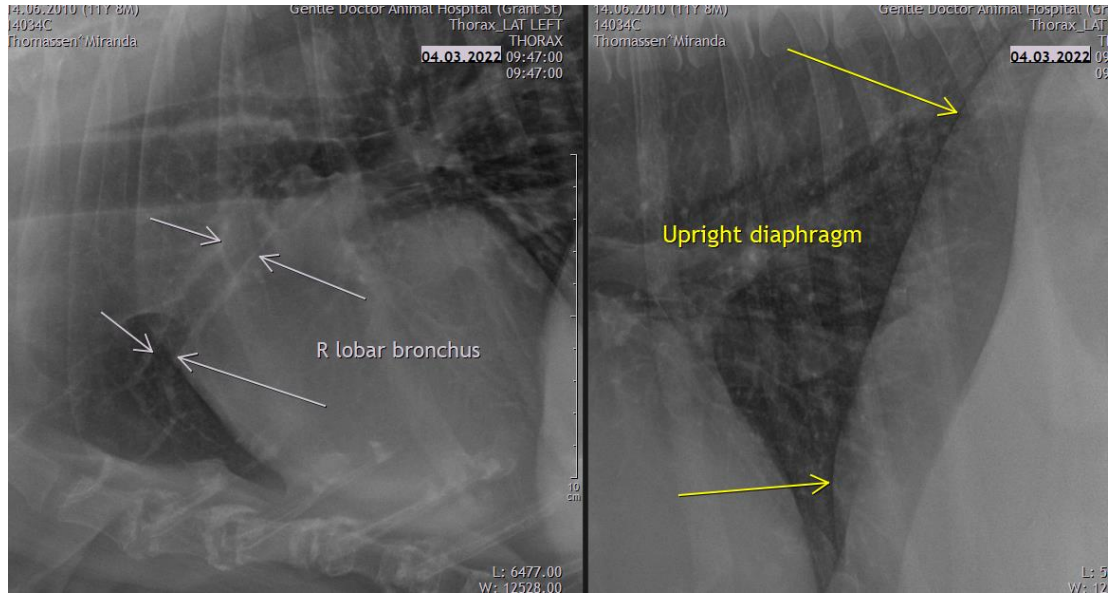
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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