



PATIENT

Mckenzie Punneo

SPECIES

Canine

BREED

Pekingese

SEX

Neutered Male

AGE

8Y

WEIGHT

12.68lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Cottage Grove
Veterinary Clinic

HOSPITAL NAME

Cottage Grove
Veterinary Clinic

REFERRING VET

Damewood

INVOICE

74831

DATE

4-30-26

PRESENTING CLINICAL SIGNS

Coughing, losing weight, collapsing/fainting after exertion

Syncopal episodes

Very faint heart murmur

RADIOGRAPHS OF THE THORAX

R/L lateral and VD are provided, totaling 2 radiographs for interpretation.

RADIOGRAPHIC FINDINGS

The body condition score is 5/9 with little s.c. fat.

The bony structures appear physiological. The ribs are evenly spaced, straight and run parallel to each other.

The cranial mediastinum is of physiologic size and opacity. The trachea converges with the thoracic spine and the carina is elevated.

The lung lobes extend to the thoracic boundaries and the crura of the diaphragm are located at L1. The vascular outline is blurred in the cranio-ventral lobes and between left atrium (LA), caudal vena cava (CVC) and diaphragm. Bronchi are highlighted in the same regions.

The cardiac silhouette occupies 95% of the chest height and 3.5 intercostal spaces. The caudal heart border is straight, and tenting of the LA is present. On the VD a bulge is located between 2 and 3 o'clock. Both main stem bronchi are laterally displaced.

RADIOGRAPHIC DIAGNOSIS

- L sided cardiomegaly, severe
- Interstitial infiltrate, moderate
- Possible bronchial compression
- Dyspnea

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are consistent with mitral valve incompetence. Echocardiography is strongly recommended to assess all valves for regurgitation and endocardiosis, obtain a fractional shortening and rule out pericardial effusion. The atrial enlargement results in displacement of carina and main stem bronchi so that compression is likely which could result in the described, syncopal episodes, depending on activity and recumbency of the dog. Bronchial compression or collapse can only be identified with bronchoscopy. This would allow identification of a possibly coexisting tracheal collapse, which can worsen the clinical signs. The interstitial infiltrate most likely represents pulmonary edema. Once cardiac examination has been performed and treatment been chosen, the weight should be monitored. In case of further weight loss abdominal ultrasound is recommended in case a tumor is present.



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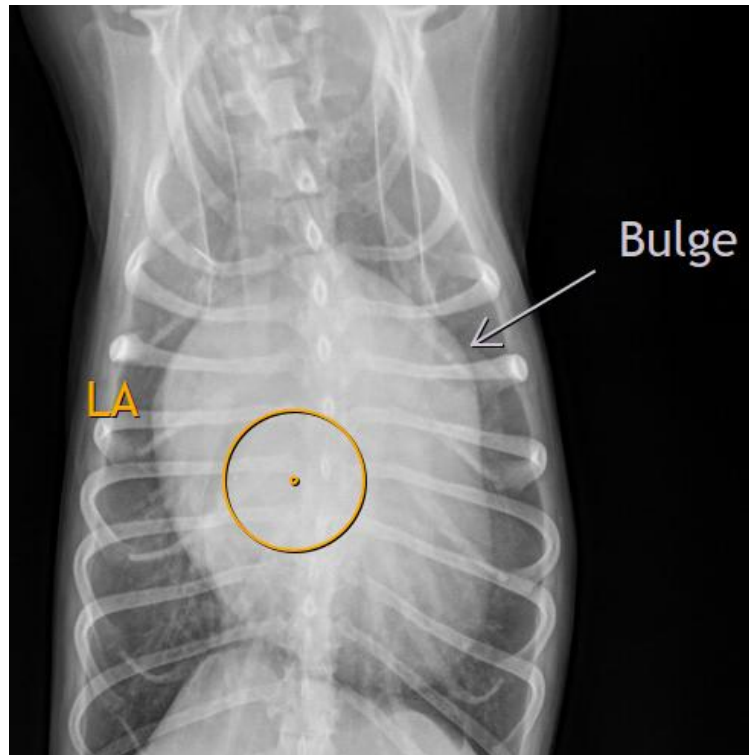
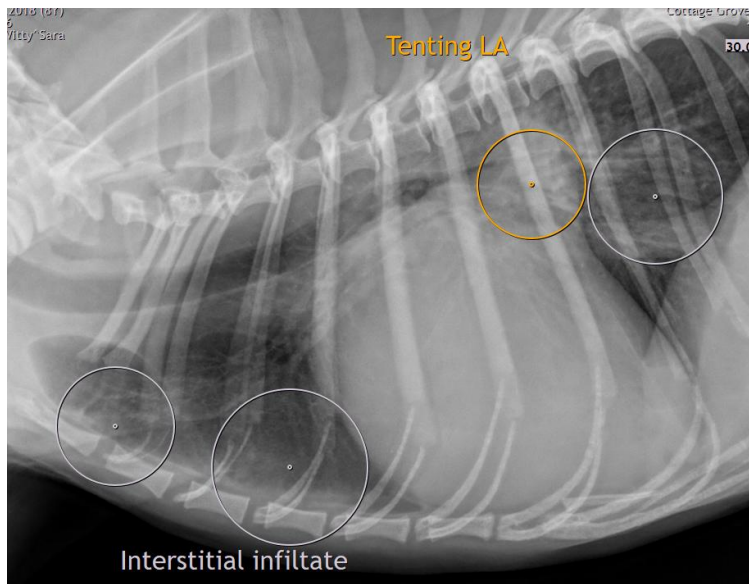
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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