



PATIENT PRESENTING CLINICAL SIGNS

Penny Lazarus History: Excessive panting.
Abnormal PE/Chem/CBC/UA Results: WNL

SPECIES RADIOGRAPHIC STUDY OF THE THORAX

Canine A fatty mass is located on the ventral sternum.

BREED

Bridging new bone formation is present along the ventral thoracic spine and in both shoulder joints. A large bone fragment appears to be located caudal to one shoulder joint.

Standard Poodle

The lungs are well inflated and the diaphragm is straight; a gap is present between caudal heart border and diaphragm. The lobar vascular outline is slightly blurred and the smaller vessels in the cranio-ventral lobes appear tortuous and vary in diameter as they taper towards the periphery. Mild bronchial calcification is present and doughnuts are evident in cranial to the cardiac shadow. A reticular interstitial pattern is present in the caudo-dorsal lobes.

SEX

Spayed Female

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

AGE

12 Years

The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces. No chamber enlargement is evident.

INTERPRETED BY

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

RADIOGRAPHIC DIAGNOSIS

- Interstitial pattern
- Enhanced bronchial markings

Incidental findings

HOSPITAL NAME

New Bridge VP

- Bridging spondylosis
- Shoulder OA (suspicious for old OCD in one shoulder)
- Lipoma sternum

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Abina Glennon

The generalized interstitial lung pattern is a non-specific finding but in association with well inflated lungs probably significant. Possible differential diagnoses for a true infiltrate include:

INVOICE

15769

- Tumor (e.g. lymphoma)
- Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic)
- Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation)
- Edema
- Hemorrhage
- Fibrosis

DATE

5/27/22



PATIENT

Penny Lazarus

Variation in peripheral vessel size can be a sign of pulmonary hypertension. Echocardiography to assess pulmonary and/or tricuspid regurgitation is recommended. A VD or DV view should be obtained and further evaluation by means of tracheobronchoscopy with bronchoalveolar lavage may have to be carried out if panting is associated with cough or other clinical signs. Care should be taken to examine the larynx for paralysis.

SPECIES

Canine

BREED

Standard Poodle

SEX

Spayed Female

AGE

12 Years

INTERPRETED BY

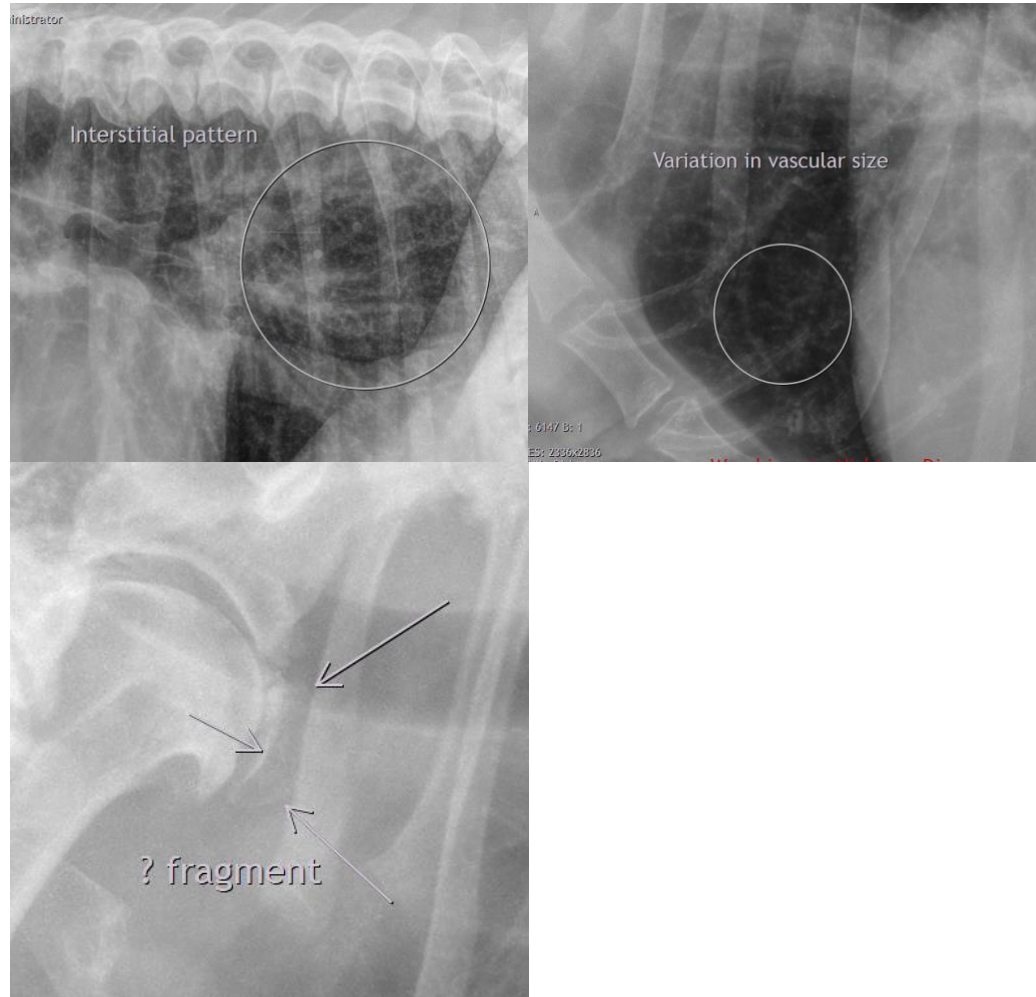
Heike Rudorf, DVM,
Dr. med. Vet.,
DipECVDI DVR

HOSPITAL NAME

New Bridge VP

REFERRING VET

Dr. Abina Glennon



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.

INVOICE

15769

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 Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
dr.h.rudorf@gmail.com

DATE

5/27/22



PATIENT

Penny Lazarus

SPECIES

Canine

BREED

Standard Poodle

SEX

Spayed Female

AGE

12 Years

INTERPRETED BY

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

HOSPITAL NAME

New Bridge VP

REFERRING VET

Dr. Abina Glennon

INVOICE

15769

DATE

5/27/22