

PATIENT

Sparky Gonzalez

SPECIES

Canine

BREED

Chihuahua

SEX

Neutered Male

AGE

12 Years 5 Months

WEIGHT

16.1

INTERPRETED BY

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

IMAGING PERFORMED BY

Stephanie

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Rivera

INVOICE

37273

DATE

5/28/26

PRESENTING CLINICAL SIGNS

History: Owner reports labored breathing beginning approximately one week ago. History of heart murmur (grade 4-5/6) and prior mild liver enzyme elevation. Presenting for decreased appetite, lethargy, and reduced activity for approximately one week

Distended abdomen with fluid wave present today.

Abnormal PE/Chem/CBC/UA Results: 1. CBC: Hematocrit 39.3 (previously 50.5 in Sep 2025), WBC 32,840, neutrophils 28,970 2. Chemistry: SDMA 32, Creatinine 3.6, BUN 51, Phosphorus 7.6, Potassium 6.2, ALT 745 (was 187 in Sep), Alk Phos 408 (was 82 in Sep), T4 <0.5 3. 4Dx: Negative 4. N/C US - no free fluid in abdomen. Fluid around heart - r/o pericardial effusion +/- thoracic effusion Decreased lung sounds caudally bilateral, grade IV/VI heart murmur. No crackles or wheezes auscultated. Distended abdomen with fluid wave present today.

RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

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

Smooth bone spurs are present on caudal scapula and humerus of one shoulder joint. The xiphisternum is slightly deformed.

Thorax

The cranial mediastinum appears to be of physiological width. The trachea runs parallel to the thoracic vertebrae and the carina is elevated. The cervical trachea is enlarged and almost obscured by a soft tissue opacity which tapers at the thoracic inlet.

The cardiac silhouette occupies 95% of the chest height and 5-6 intercostal spaces (VHS 16). On the VD view the cardiac silhouette appears round; the main stem bronchi are slightly displaced suggesting left atrial enlargement.

The degree of dorsal pulmonary expansion is good. Thin pleural fissure lines are evident between all lobes; the caudal edge of the left cranial lobe is rounded. Pulmonary vessels are visible, their diameter is reduced. The bronchial tree is thin walled and the left main stem bronchus appears wide while tapering abruptly.

Abdomen

Abdominal detail is reduced, especially in the mid-abdomen; the ventral abdominal wall is pendulous.

In right lateral recumbency the ventral liver lobe extends just beyond the costal arch and is rounded.

The head of the spleen appears physiological and is surrounded by striated fat.

The stomach contains some air. Distribution and size of the small intestinal loops appear physiological. The terminal colon contains gas.

Other organs cannot be appreciated.

RADIOGRAPHIC DIAGNOSIS

- Generalized cardiomegaly
 - Including LA enlargement
- Hypovolemia
- Pleural fissures
- Tracheal collapse



PATIENT

Sparky Gonzalez

- Reduced abdominal detail
- Hepatomegaly, mild
- Pendulous ventral abdominal wall

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Incidental finding

- Shoulder arthrosis, unilateral (poss. R)
- Deformed xiphisternum

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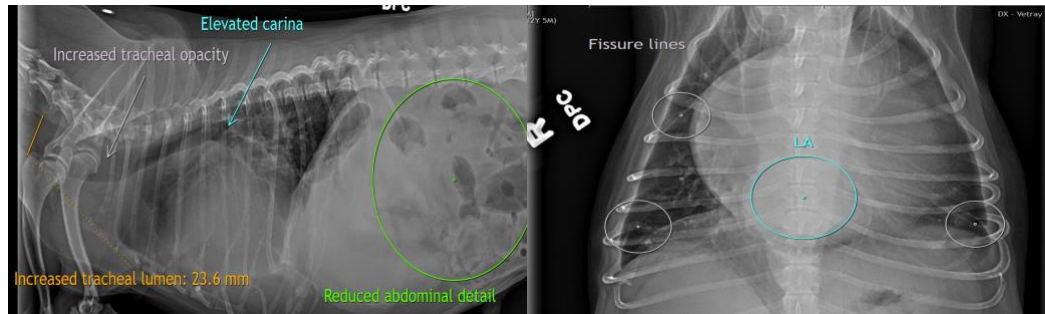
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An enlarged, rounded cardiac shape with reduced size of pulmonary vessels and bi-cavitary effusion is compatible with pericardial effusion. DCM is unlikely in small breed dogs. Mitral endocardiosis is a likely reason for the left atrial enlargement and would explain the murmur. Right sided failure can be a sequel to long term left AV valve disease. Echocardiography is necessary to identify masses, left atrial tamponade and right sided overload. Compression of carina and terminal trachea can cause respiratory difficulties which can cause secondary bronchial and tracheal collapse. The latter is present in the cervical region.



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