



PATIENT

Scarlet Robertson

SPECIES

Canine

BREED

English Bulldog

SEX

FS

AGE

6Y

WEIGHT

38lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

Rodriguez

INVOICE

75227

DATE

6-1-26

PRESENTING CLINICAL SIGNS

Hx of PLE managed on steroids (15mg SID). Recent increase in WBC. PE WNL. BAR no cough. Clinically doing well. Afebrile

Abnormal PE/Chem/CBC/UA Results: RBC: 4.94, HCT; 37.4, WBC: 21.65, Neut: 19.5, Lymph: 1.15, Mono: 0.97, ALK: 299. Creat: 0.2. ALB: .6, TP: 5.4, Glob: 2.8. U/A WNL

RADIOGRAPHS OF THE THORAX

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

RADIOGRAPHIC FINDINGS

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

Thoracic kyphosis is accompanied by malformed vertebrae and ventral spondylosis between T4 and 10. Bridging ventral spondylosis extends from T13 to L2, with L1 being short.

The cranial mediastinum flattens the cranial border of the right cranial lung lobe and positions it level with rib 1. The trachea is of reasonable diameter and dips at the carina.

The cardiac silhouette occupies 85% of the chest height and 4 intercostal spaces. A chamber or outflow tract enlargement is not obvious.

The degree of pulmonary expansion is fair. Pulmonary vessels are seen to the tertiary branches in the caudal lobes on the VD. The bronchial tree is calcified, and the walls are slightly thickened. A nodular opacity is superimposed onto the caudal right lobe.

RADIOGRAPHIC DIAGNOSIS

- Broncho-interstitial pattern
- Bronchial calcification

Incidental finding:

- Breed related spinal anomalies

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An interstitial lung pattern is a non-specific finding and accentuated by the only fair expansion of the lung field. In combination with the mild peribronchial thickening possible differential diagnoses include:

- Infection (bacterial, fungal e.g., candida, viral, Rickettsia, Spirochetes, parasitic e.g., angiostrongylus)
- Inflammation (allergic pneumonitis, eosinophilic bronchopneumopathy, smoke inhalation)

Fecal samples should be obtained to rule out parasites. Bronchitis can be present without overt radiographic evidence and thus bronchoscopy with broncho-alveolar lavage is recommended; samples should be submitted for bacteriological and cytological examination.

The nodular opacity on the VD most likely represents a superimposed nipple; two nipples are seen in this region on the lateral view. Mediastinal width in barrel chest dogs is increased compared to other breeds and thus the position of the cranial lobes is likely within normal limits.

Ultrasound examination of the abdomen is recommended in case of lymphadenitis. Checking the cranial mediastinum for a mass lesion (e.g., small abscess) is also advised.



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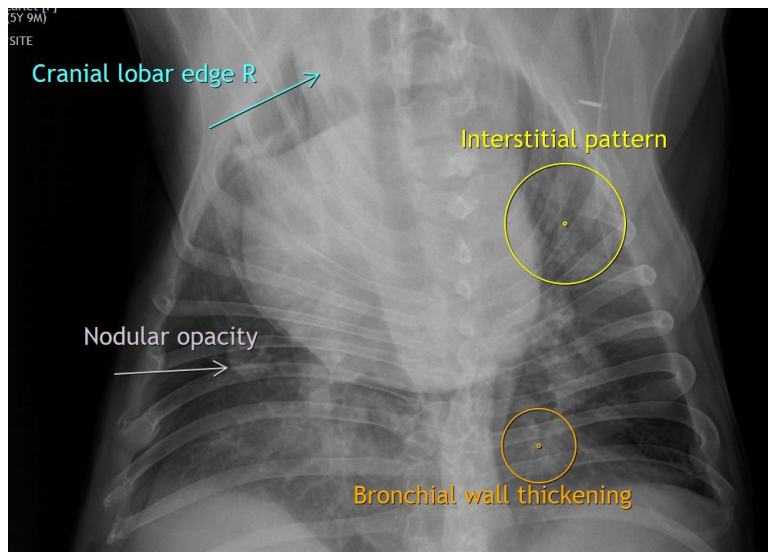
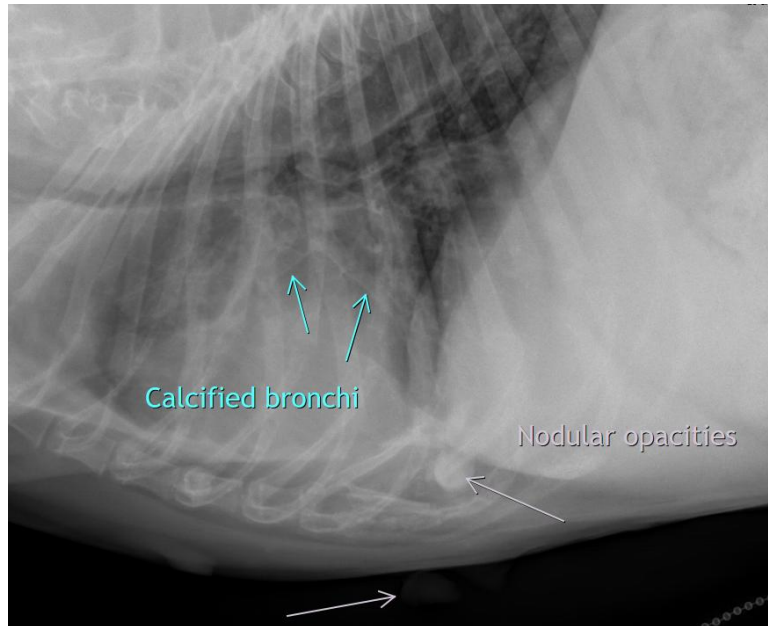
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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