



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Abby Christy
SPECIES History: p is here to recheck chest rads, o said not getting worse but not improving, raspy breathing, chest rises when breathing, o notices eye discharge(gray), cough is still present, stopped eating a few days ago and vomited x2(yellow bile), stopped meds and p began eating again and no longer vomited
 Abnormal PE/Chem/CBC/UA Results: Exam Notes: BAR; harsh lung sounds in all fields, grade III/VI murmur; coughing in room and in xray room; mild light green/gray discharge OS

Canine

RADIOGRAPHIC STUDY OF THE THORAX

BREED The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity. The bony structures appear physiological.

Pit Bull

SEX A generalized loss of clear vascular outline with bronchial enhancement is present. The R caudal lobe shows partial consolidation with airbronchograms, the right main stem bronchus for the caudal lobe is displaced ventrally and to the left and straightened. The bronchus for the middle lobe is displaced cranially. Both are slightly reduced in diameter.

Spayed Female

AGE The cranial mediastinum between ribs one and two is widened with rounded ventral borders. The trachea runs parallel to the thoracic vertebrae and dips abruptly at the carina; one main stem bronchus shows an acute dorsal angle.

8 Years

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

INTERPRETED BY

RADIOGRAPHIC DIAGNOSIS

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

- Generalized interstitial infiltrate
- Alveolar consolidation R middle and caudal lobes
- Lymphadenomegaly

HOSPITAL NAME

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DPC Veterinary H

The combination of lung infiltrate, bronchial compression and lymphadenomegaly is most likely due to a tumour (e.g. lymphoma, adenocarcinoma, bronchogenic carcinoma). Differential diagnoses include granuloma and infection though size and shape is unusual for abscesses. The pathology is close to the thoracic wall and ultrasound guided FNA is thus possible. Samples of the mediastinal nodes should also be obtained.

REFERRING VET

Dr. White

INVOICE

16300

DATE

6/24/22



PATIENT

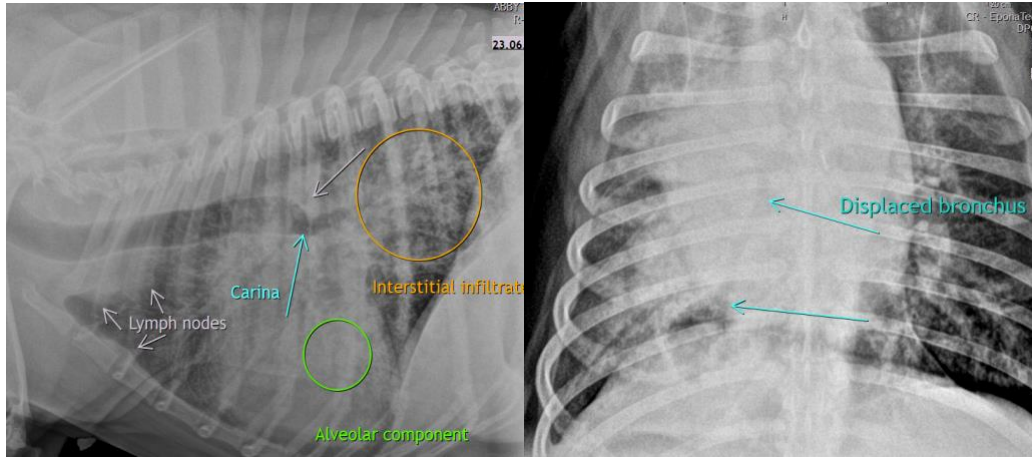
Abby Christy

SPECIES

Canine

BREED

Pit Bull



SEX

Spayed Female

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.

AGE

8 Years

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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