



PATIENT	PRESENTING CLINICAL SIGNS
Benjermín Short	RECHECK FROM ADVANCED FOR HIT BY CAR
SPECIES	Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, decreased bronchovesicular sounds. No crackles or wheezes present OU: lenticular sclerosis. No nasal discharge. No cough on tracheal palpation. Oral cavity: Missing some teeth, moderate to severe dental tartar Musculoskeletal: BCS = 4/9. Skin: Multiple superficial abrasions. Diagnostics/Treatments: None Findings: 1) Thoracic radiographs: Consult pending 2) PCV: 30% 3) HWT: negative
Canine	
BREED	RADIOGRAPH OF THE THORAX
Mixed	2 orthogonal views
SEX	RADIOGRAPHIC FINDINGS
NM	The body condition score is 5/9. On the VD view the skin surfaces lateral to the scapulae are irregular and the layering of fat and soft tissue is altered. This is most obvious on the right side.
AGE	A horizontal fracture is present in rib 5 on the right. The fragments are mildly displaced. Only 5 sternbrae are present (apart from manubrium and xiphisternum).
13 Years, 5 Months	On the right lateral recumbent view the ventral thorax has a lobulated, soft tissue appearance. Only one set of cranial lobar vessels is evident on the lateral view, both cranial lobes are aerated on the VD view.
INTERPRETED BY	The cranial mediastinum is of physiological width on the VD view. The trachea diverges from the thoracic vertebrae and dips at the carina.
Heike Rudolf, DVM, Dr. med. Vet., DipECVDDI DVR	The cardiac silhouette occupies 75% of the chest height, the cranio-caudal width is not readily assessable. On the VD view it has moved with the sternum to the right side and is in close contact with the chest wall. No chamber or outflow tract enlargement is evident.
HOSPITAL NAME	RADIOGRAPHIC DIAGNOSIS
DPC Veterinary Hospital	<ul style="list-style-type: none"> • Fracture rib 5 on right • Irregular skin outline • Possible R middle lobe pathology
REFERRING VET	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Dr. Rivera	The irregular skin outline is likely associated with the described skin abrasions and could be the cause for the lobulated soft tissue appearance in the ventral aspect of the thorax on the lateral view. The apparent mediastinal shift to the right is most likely the result of mild rotation but could also be associated with pathology of the right middle lobe (e.g. collapse, torsion), especially as it is level with the fractured rib. The dog should be closely monitored and if respiratory signs develop, a VD or DV view should be obtained followed by a left lateral view which allows assessment of the right lung. In case pleural fluid develops, a CT examination is recommended to rule out a lung lobe torsion.
INVOICE	
52655	
DATE	
6-30-22	



PATIENT

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SPECIES

Canine

BREED

Mixed

SEX

NM

AGE

13 Years, 5 Months

INTERPRETED BY

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

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

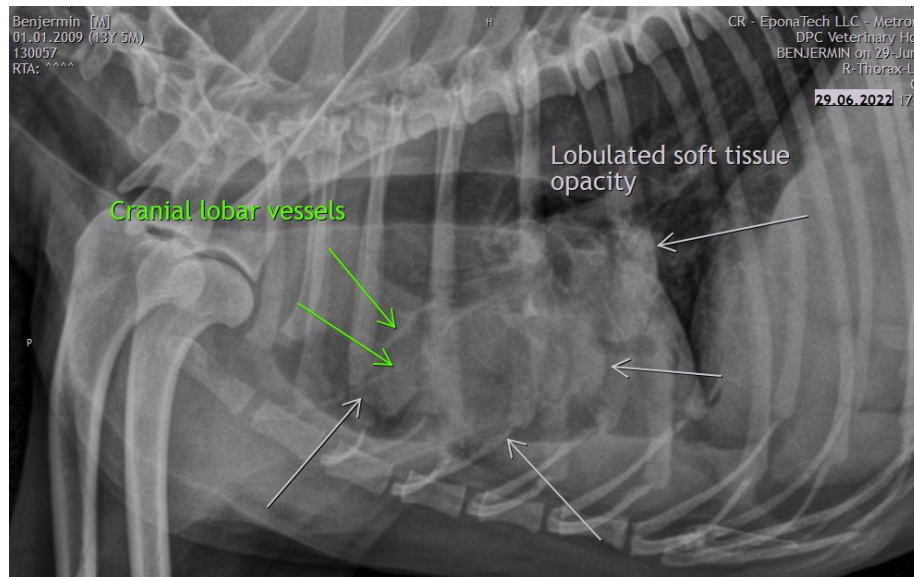
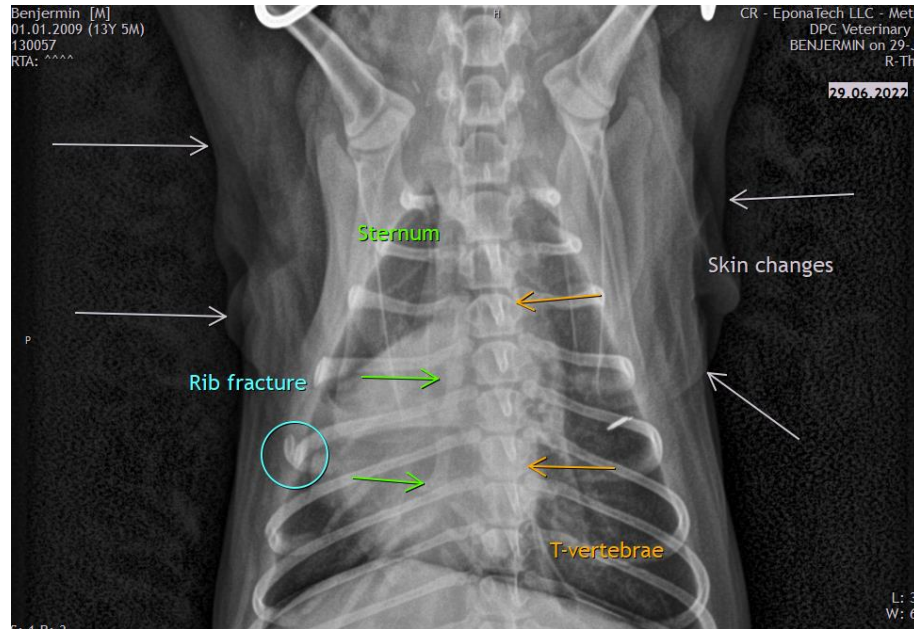
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Mixed

Heike Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
Dr.H.Rudorf@gmail.com

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