



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Honda Lazier History: coughing and labored breathing. still eating fine.

SPECIES Abnormal PE/Chem/CBC/UA Results: upon physical exam; eupnea, no resp distress. R popliteal LN enlarged. no heart murmurs. lungs clear. WBC 19k with neutrophilia (15k)and mild monocytosis. normal chemistry chest rads diffuse patchy interstitial pattern

Canine

RADIOGRAPHIC STUDY OF THE THORAX

BREED The degree of pulmonary expansion is fair on all views. The periphery of the lung lobes shows consolidation. A mixture of alveolar and interstitial infiltrate is present in more centrally and in the caudo-dorsal lung field. An air bronchogram is visible in the cranial lung field and peripheral bronchi are highlighted in the caudo-dorsal lobes. Overlying the right side of the dome of the diaphragm the infiltrate appears almost nodular.

Mix Labrador Retriever

SEX The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and dips at the carina. The visible pulmonary vasculature appears to have a physiological size.

Male

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

AGE

7 Years

The body condition score is 8/9 with smooth alternating layers of fat and soft tissue opacity. The bony structures appear physiological.

INTERPRETED BY RADIOGRAPHIC DIAGNOSIS

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

- Interstitial-alveolar infiltrate

HOSPITAL NAME INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Harmony AH

The infiltrate could be inflammatory (e.g. eosinophilic pneumopathy, interstitial pneumonia +/- fibrosis, granulomatous pneumonia), infectious (e.g. viral, bacterial, fungal) or hemorrhagic (e.g. warfarin poisoning, DIC) in nature. In case laryngeal paralysis is present, pulmonary edema is also a differential diagnosis. Tumor such as interstitial lymphoma or diffuse adenocarcinoma cannot be ruled out. A sample would be need for a diagnosis, which can be obtained under ultrasound guidance or via bronchoscopy; tumour cells can be absent in the obtained sample though. Alternatively, treatment with aminophylline, antibiotics, corticosteroids can be tried. Should the relief be only temporary, interstitial pneumonia with fibrosis or tumour are the most likely differential diagnoses.

REFERRING VET

Dr. Minjeong Gwon

INVOICE

15960

DATE

6/9/22



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Honda Lazier

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Retriever

SEX

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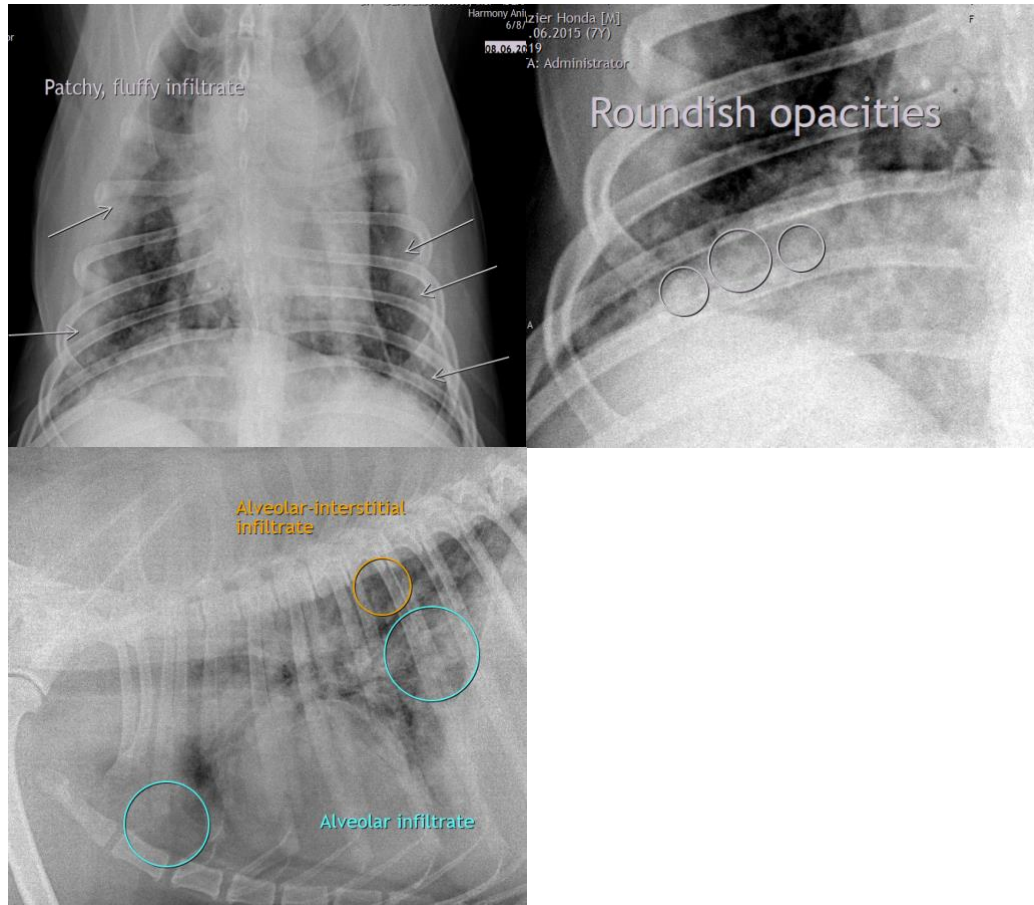
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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



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