



PATIENT PRESENTING CLINICAL SIGNS

Jaxx Reddy History: P recovered from presumptive infectious tracheobronchitis 2 months ago w empirical Doxycycline; then starting July 4th (P VERY stressed), P started to display breathy puffing w some abdominal heaving - never productive - difficult to discern if episodes were respiratory VS GI in nature; NOTE: P always wears brace at L antebrachium due to hyperextension carpal injury as a juvenile.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

BREED

Boxer Mix

The body condition score is 6/9 and the abdominal wall is tucked in. Small, calcified opacities are located in the region of the prepubic tendon.

Spondylosis is present especially in the thoraco-lumbar region. New bone is located at the facet joints L2 – L6.

SEX

Thorax

Neutered Male

In left lateral recumbency a small, rounded structure with an opacity between calcium and soft tissue is located over the cardiac silhouette. In right lateral recumbency a similar structure is located cauda to distal ribs 4. The lungs are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery.

AGE

11

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and dips at the carina.

INTERPRETED BY

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

The cardiac silhouette occupies 75% of the chest height and 2.75 intercostal spaces. No chamber or outflow tract enlargement is evident.

Abdomen

HOSPITAL NAME

DTLAvets

The abdominal detail is reasonable with the abdominal fat predominantly located ventral to the liver; diaphragm and abdominal wall are intact.

The liver is located within the costal arch and the caudo-ventral lobe is pointed.

REFERRING VET

Dr. Castaneda

The spleen appears physiological.

The stomach contains a small amount of air; distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a small amount of fecal matter, the cecum contains gas.

INVOICE

23406

Both renal shadows are difficult to see but do not appear enlarged. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

The sublumbar region appears physiological.

DATE

7/14/23



PATIENT RADIOGRAPHIC DIAGNOSIS

- Jaxx Reddy
- Reduced renal visibility
 - Small, round pulmonary opacities

Incidental findings

SPECIES

- Canine
- Spondylosis
 - Facet arthropathy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Boxer Mix

Altered breathing can be due to pain or respiratory disease. To identify the former, abdominal ultrasound is recommended to assess especially the pancreas; this may have to be followed by routine blood analysis and cPLI. A neurological examination will help rule out disc disease. Poor visibility of both kidneys may be due to a lack of surrounding fat and superimposition of intestinal loops but could also represent small kidneys which will become evident during ultrasound.

SEX

Neutered Male

Bronchitis can be present without radiographic changes and once pancreatitis and disc disease have been ruled out, trachea-bronchoscopy with broncho-alveolar lavage is recommended. The larynx should be examined for paralysis prior to the GA.

AGE

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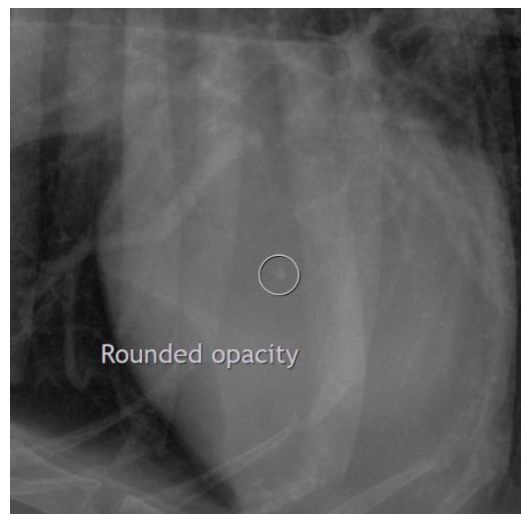
The small, round opacities overlying the cardiac shadow most likely represent pulmonary osteomata and can be monitored radiographically.

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HOSPITAL NAME

DTLAvets



Rounded opacity

REFERRING VET

Dr. Castaneda

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.

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



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Jaxx Reddy

SPECIES

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