



PATIENT PRESENTING CLINICAL SIGNS

Buster Westin History: History weight loss, lethargy, cough with minimal improvement on antibiotics
Abnormal PE/Chem/CBC/UA Results: Blood pending

SPECIES RADIOGRAPHIC STUDY OF THE THORAX

Canine The body condition score is 7/9 with a large amount of subcutaneous fat dorsal to the C-spine. The bony structures appear physiological.

BREED The lungs are in contact with the thoracic boundaries. In the caudal lobes the background is opaque containing branching, lucent, tubular structures (bronchi). Splitting of the main stem bronchi is present. The cranial lobar vessels are well outlined to the secondary branch; the vessel diameter at the intersection with rib 4 equals that of the rib.

Mix

SEX The cranial mediastinum is of physiological size and opacity. The trachea runs parallel to the thoracic vertebrae and converges with the vertebrae at the carina.

Neutered Male

AGE The cardiac silhouette occupies 90% of the chest height and 3 intercostal spaces. The caudal heart border is straight and tenting of the left atrium (LA) is present. The liver appears to be of physiological size.

9 Years

RADIOGRAPHIC DIAGNOSIS

- Left sided cardiomegaly
- Hyperperfusion
- Mixed lung infiltrate

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are compatible with left sided heart failure with mitral regurgitation and pulmonary edema. Depending on the type of mixed breed the mitral incompetence may be due to mitral endocardiosis (usually small breed dogs) or could be the result of DCM (usually large breed dogs). A small amount of pericardial effusion may be associated with DCM. Echocardiography is thus recommended after diuretic treatment has been started.

HOSPITAL NAME

Hamburg VC

REFERRING VET

Dr. Branning

INVOICE

16526

DATE

7/8/22



PATIENT

Buster Westin

SPECIES

Canine

BREED

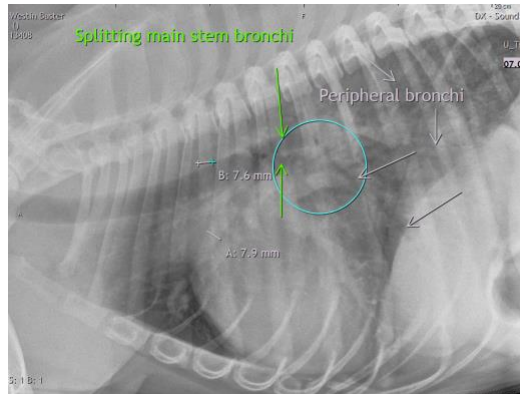
Mix

SEX

Neutered Male

AGE

9 Years



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.

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