



**PATIENT PRESENTING CLINICAL SIGNS**

Luna Burke pet was stung by hornets 2 days ago, owner gave benadryl and reaction went away. For last two days pet was doing okay but today seems lethargic, drooling, breathing heavily

**SPECIES** Abnormal PE/Chem/CBC/UA Results: PE: Fever Bloodwork was unremarkable 4dx was negative

**RADIOGRAPHIC STUDY OF THORAX & ABDOMEN**

Canine No date obvious

**BREED** Thorax: RLR and LLR

Great Dane Abdomen: 2x LLR

**RADIOGRAPHIC FINDINGS**

**SEX** The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity.

FS Smooth, bridging new bone formation is present on the ventral aspect of T6/7.

Thorax

**AGE** In both lateral recumbencies ventral lung consolidation with air bronchograms is present over the cardiac silhouette, just dorsal to the sternum. It affects the right middle and the left cranial lobe.

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

**INTERPRETED BY**

Heike Rudolf, DVM, Dr. med. Vet., DipECVDI DVR The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. No chamber or outflow tract enlargement is evident.

Abdomen

**HOSPITAL NAME**

The Collegeway Animal Hospital

The abdominal detail is good; diaphragm and abdominal wall are intact.

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

The spleen appears physiological.

**REFERRING VET**

Dr Ehab Hanna

The stomach contains a moderate amount of air which continues into the duodenum and proximal jejunum. Distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a small amount of unformed fecal matter.

Both renal shadows have a physiological size, shape and opacity; the surfaces are smooth. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

**INVOICE** The sublumbar region appears physiological.

59784 **RADIOGRAPHIC DIAGNOSIS**

- Ventral alveolar infiltrate

**DATE**

8-17-23

Incidental findings:

- Spondylosis
- Gas in stomach and proximal small intestine



**PATIENT**

Luna Burke

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Differential diagnoses for a bilateral, ventral alveolar infiltrate include aspiration pneumonia and hemorrhage. In case Benadryl was administered orally, it is possible that saliva was aspirated during the procedure. This would explain the onset two days after administration. However, it could also represent a reaction to the sting and represent edema. I suggest repeating hematology to identify if leukocytes are rising. Re-radiographing the dog after antibiotic treatment is also recommended. In case aspiration pneumonia reoccurs, laryngeal paralysis and megaesophagus have to be ruled out. The air/gas in the cranial gastro-intestinal tract is most likely the result of aerophagia which can be most likely stress related.

**SPECIES**

Canine

**BREED**

Great Dane

**TECHNICAL COMMENTS**

Human fingers in primary beam on abdominal views.

**SEX**

FS

Non-DICOM images were submitted. The transformation from DICOM to other formats reduces the image quality and only allows limited manipulation of the image. More subtle lesions can thus easily be missed. For the best possible imaging reports I suggest submitting DICOM images in the future.

**AGE**

2 Years

**INTERPRETED BY**

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

**HOSPITAL NAME**

The Collegeway  
Animal Hospital

**REFERRING VET**

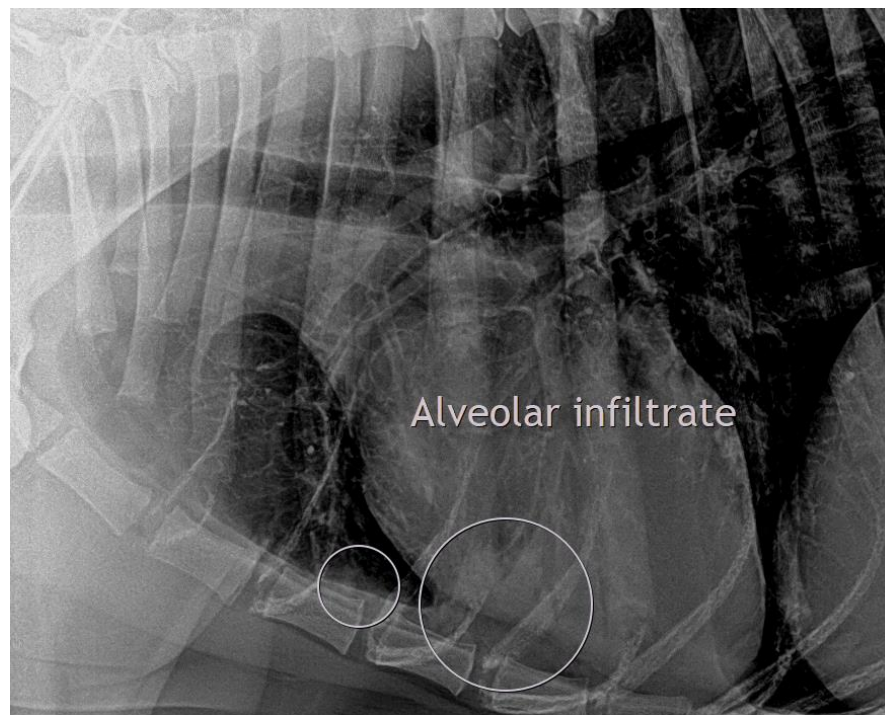
Dr Ehab Hanna

**INVOICE**

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**PATIENT**

Luna Burke

**SPECIES**

Canine

**BREED**

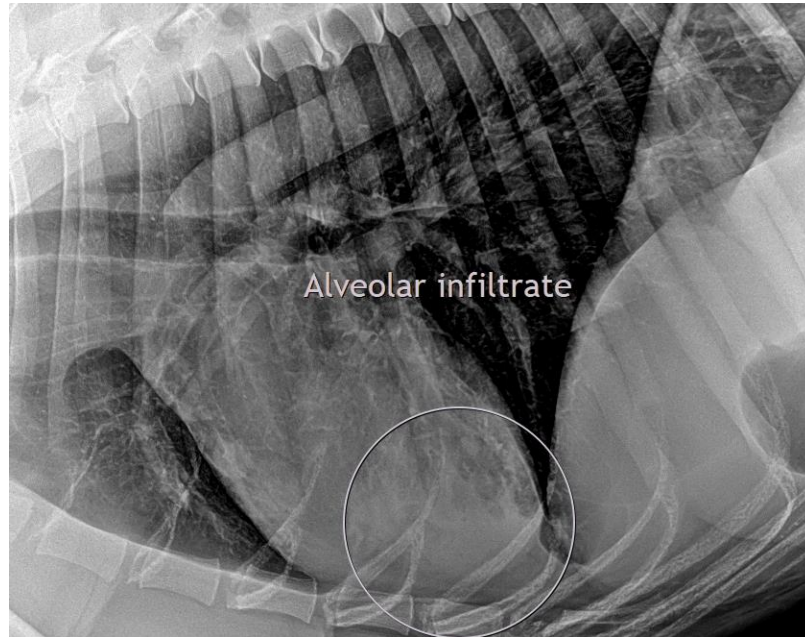
Great Dane

**SEX**

FS

**AGE**

2 Years



**INTERPRETED BY**

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

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.

**HOSPITAL NAME**

The Collegeway  
Animal Hospital

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 Rudolf, DVM, Dr. med. vet., DipECVDDI, DVR**  
Dr.H.Rudorf@gmail.com

**REFERRING VET**

Dr Ehab Hanna

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