



PATIENT	PRESENTING CLINICAL SIGNS
Sarge Rescue North, Save a Soul	Hx of L salivary gland enlargement. Was seen by previous vet who diagnosed sialanosis. Also a history of horners as described by owner. Suspected thoracic mass previously
SPECIES	Abnormal PE/Chem/CBC/UA Results: L head tilt; No abducent on R; No nystagmus; Decreased palpebral R; Tongue deviation to R; No gag reflex; Continual gagging cough in room. Upper respiratory stridor; Muscle wasting over temporal muscles as well as paraspinal muscles
Canine	RADIOGRAPHIC STUDY OF THE THORAX
BREED	RLR, LLR, DV
Pit/Husky Mix	RADIOGRAPHIC FINDINGS
SEX	The body condition score is 6/9 with a fatty bump dorsal to the first four dorsal spinous processes.
MN	The bony structures appear physiological.
AGE	The lungs are in contact with the thoracic boundaries; the cranial lobes are convex and slightly rounded. The lobar vessels are visible, but the tertiary branches are blurred. The bronchial tree is thin walled and tapers uniformly towards the periphery.
8	The cranial mediastinum appears to be of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5.
INTERPRETED BY	The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces (VHS 10.5). The caudal heart border is straight and mild tenting of the left atrium is present. The main stem bronchi appear to be slightly bowed laterally.
Heike Rudolf, DVM, Dr. med. Vet., DipECVDI DVR	RADIOGRAPHIC DIAGNOSIS
HOSPITAL NAME	<ul style="list-style-type: none"> • Left sided cardiomegaly • Interstitial pattern
Torch Lake Veterinary Clinic	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
REFERRING VET	The cardiac changes are highly suggestive of mitral insufficiency which, in large breed dogs, is usually due to DCM. Echocardiography is necessary.
Adrienne Waffle	The generalized interstitial lung pattern is a non-specific finding. Possible differential diagnoses for a true infiltrate include:
INVOICE	<ul style="list-style-type: none"> • Edema • DIC • Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic) • Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation) • Tumor (e.g. lymphoma)
47164	Further evaluation by means of tracheobronchoscopy with bronchoalveolar lavage should be considered.
DATE	
8-28-21	



PATIENT

Sarge Rescue North,
Save a Soul

The signs detected on clinical examination suggest a central or peripheral nerve lesion. MRI of the brain is recommended and may have to be followed by CSF analysis. Laryngeal paralysis should be ruled out visually during intubation.

SPECIES

Canine

BREED

Pit/Husky Mix

SEX

MN

AGE

8

INTERPRETED BY

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

HOSPITAL NAME

Torch Lake
Veterinary Clinic

REFERRING VET

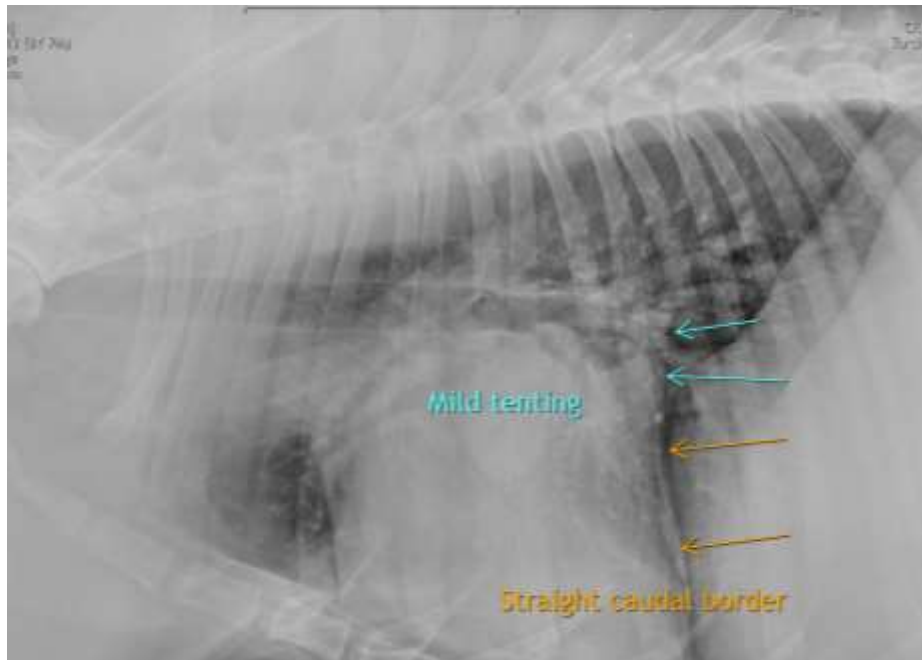
Adrienne Waffle

INVOICE

47164

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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