



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Molly Belongia
SPECIES History: Was coughing 7/11/23 Kim elected to just fill ,eds and wait on exam. We dispensed Amoxi/Clavamox and Cough tabs Got better but she still will hacking/gag,sounds like she's choking when she's excited. Episodes happen 3-4 times a day. Gags and retches Vomited Tues during the storm Yesterday didn't eat at all until evening Did eat this morning Sensitive stomach Eating grass lately.

SPECIES Canine
 Abnormal PE/Chem/CBC/UA Results: WNL

BREED RADIOGRAPHIC STUDY OF THE THORAX

BREED Pointer Mix
 The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity. The bony structures appear physiological.

Thorax

SEX Spayed Female
 The degree of pulmonary expansion is fair. The lungs are in contact with the thoracic boundaries and the tips are pointed. The outline of the peripheral vessels is blurred. The bronchial tree is thin walled and highlighted in the periphery.

AGE 1 Year 3 Months
 The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and dips at the carina.
 The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces (VHS 10). No chamber or outflow tract enlargement is evident.

INTERPRETED BY Neck

INTERPRETED BY Heike Rudolf, DVM, Dr. med. Vet., DipECVDI DVR
 The surrounding muscles and fat layers appear physiological.
 Number and shape of the vertebrae are physiological. The skeletal structures are well mineralized and have smooth surfaces.

HOSPITAL NAME Elizabeth AH
 The disc spaces are of homogeneous width.

Laryngeal and pharyngeal soft tissue structures are unremarkable. The region of lymph nodes, thyroid- as well as salivary glands appear physiological.

REFERRING VET RADIOGRAPHIC DIAGNOSIS

REFERRING VET Leon Anderson, DVM
 • Interstitial lung pattern

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE 23788
 The generalized interstitial lung pattern is a non-specific finding and accentuated by the only fair expansion of the lung field. Possible differential diagnoses for a true infiltrate include:

- Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic)
- Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation)
- Edema

DATE

8/4/23



PATIENT

Molly Belongia

- Hemorrhage
- Protein
- Fibrosis
- Tumor (e.g. lymphoma)

SPECIES

Canine

Should the clinical signs remain despite conservative treatment, tracheobronchoscopy with bronchoalveolar lavage should be carried out. Laryngeal dysfunction and tonsillar pathologies can be ruled out prior to this examination.

Gagging and retching can be due to gastro-esophageal reflux and gastroscopy will help identify a resulting, localized esophagitis.

BREED

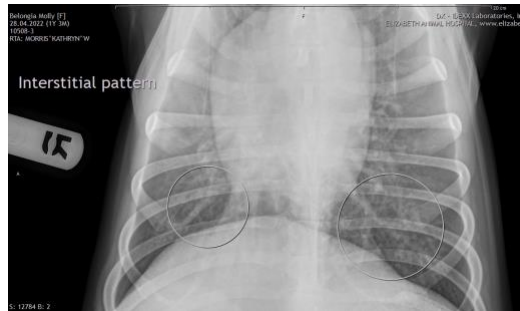
Pointer Mix

SEX

Spayed Female

AGE

1 Year 3 Months



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.

INTERPRETED BY

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

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., DipECVDI, DVR
info@sonopath.com

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Leon Anderson, DVM

INVOICE

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