



**PATIENT PRESENTING CLINICAL SIGNS**

Mac Ready Recent increase in panting Hx of KCS and allergic skin dz  
 Abnormal PE/Chem/CBC/UA Results: PE: Increased lung sounds all fields, abdomen mildly distended, dental disease CBC: NSF Chem: ALP 396, ALT 372, BUN 31, CRE 1.5 UA: NSF

**SPECIES RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN**

Canine Thorax: R and LLR, 2x VD  
 Abdomen: RLR, 2x VD

**BREED RADIOGRAPHIC FINDINGS**

English Bulldog The body condition score is 7/9 with smooth alternating layers of fat and soft tissue opacity.

**SEX** Lumbar bridging- and ventral thoracic spondylosis is present. T6/7 and T9/10 show congenital anomalies (i.e. wedge shape)

**MN** Thorax

**AGE** The degree of pulmonary expansion on the lateral views is fair at best. The lungs are in contact with the thoracic boundaries and the tips are pointed. They protrude slightly into the intercostal spaces on the VD views. The lobar vessels are blurred, especially on the lateral views; on the VD a reticular pattern is apparent.

10 Years

**INTERPRETED BY** The mediastinum is wide and contains fat. The trachea runs parallel to the thoracic vertebrae and dips at the carina. The tracheal diameter is homogeneous and slightly decreased compared to the height of the air column in the larynx. An esophageal gas pouch is located over the trachea level with T1/2.  
 Heike Rudolf, DVM,  
 Dr. med. Vet.,  
 DipECVDI DVR

**HOSPITAL NAME** The cardiac silhouette occupies 85%, the cranial and caudal borders are not detectable. On the VD view the cardiac silhouette appears slightly globular and the main stem bronchi for the caudal lobes are laterally displaced. No chamber or outflow tract enlargement is evident.

Sunset Animal Hospital

Abdomen

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

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

The head of the spleen appears physiological.

**INVOICE** Stomach and small intestine contain some gas; colon and rectum some unformed fecal matter. Size and position are physiological.  
 47390

**DATE** Both renal shadows not clearly visible. The bladder is located in the abdominal cavity and contains a moderate amount of homogeneous fluid opacity.

9-14-21 The region of the sublumbar lymph nodes appears physiological.



**PATIENT**

Mac Ready

**SPECIES**

Canine

**BREED**

English Bulldog

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Heike Rudolf, DVM,  
Dr. med. Vet.,  
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**HOSPITAL NAME**

Sunset Animal  
Hospital

**REFERRING VET**

Christina Polit

**INVOICE**

47390

**DATE**

9-14-21

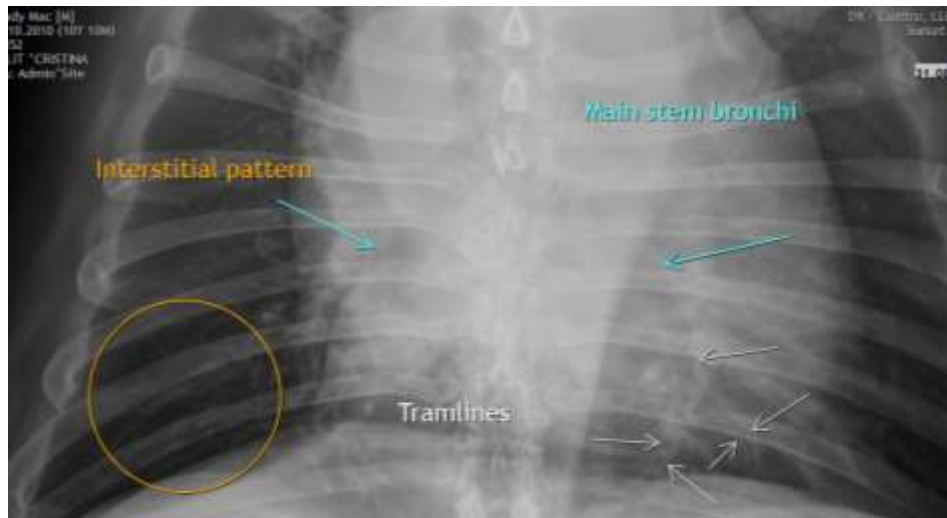
**RADIOGRAPHIC DIAGNOSIS**

- Broncho-interstitial pattern
- Congenital vertebral anomalies
- Possible cardiomegaly

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic findings are suggestive of chronic lower airway disease. Eosinophilic/allergic bronchopneumopathy is a potential as well as infectious bronchitis such as viral, bacterial, parasitic, or protozoal. Bronchoscopy including BAL is necessary for a definitive diagnosis. Tracheal and main bronchial collapse will also be visible if present. The height of the heart and the splayed caudal bronchi suggests L sided cardiomegaly thus echocardiography is recommended to rule out DCM or other reasons of valvular incompetence.

Obesity is known to worsen clinical signs of cough and impair lung function; weight control is recommended.



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.

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