



PATIENT PRESENTING CLINICAL SIGNS

Ghost Eaton coughing r/o pneumonia
Abnormal PE/Chem/CBC/UA Results: cbc pending

SPECIES RADIOGRAPHIC STUDY OF THE THORAX

Canine 2x lateral recumbency

RADIOGRAPHIC FINDINGS

BREED The body condition score is 5-6/9.

Husky The bony structures appear physiological.

SEX The degree of pulmonary expansion is very good with a gap of 4cm between caudal heart border and diaphragm. The lungs are in contact with the thoracic boundaries and the tips are pointed, the cranial lobes extend cranially past the first rib. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled, calcified and slightly undulating in places.

Male

AGE The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae and the carina is located at T5.

1 Year

The cardiac silhouette occupies 75% of the chest height and 2.5 intercostal spaces. No chamber or outflow tract enlargement is evident.

INTERPRETED BY

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

RADIOGRAPHIC DIAGNOSIS

- Overinflation of lungs, mild
- Bronchial calcification

HOSPITAL NAME

New Bridge
Veterinary Practice

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overinflation could be due to the low/normal BCS but may also represent an inability to fully empty the lungs as occurs in pulmonary obstructive disease. Obtaining a lateral view at end-expiration can be obtained to verify this if clinical signs are compatible with obstructive lung disease. Bronchial wall calcification with localized irregular outline is unusual in such a young dog and bronchoscopy with BAL is recommended as a further diagnostic test.

REFERRING VET

Dr. Abina Glennon

INVOICE

47319

DATE

9-2-21



PATIENT

Ghost Eaton

SPECIES

Canine

BREED

Husky

SEX

Male

AGE

1 Year

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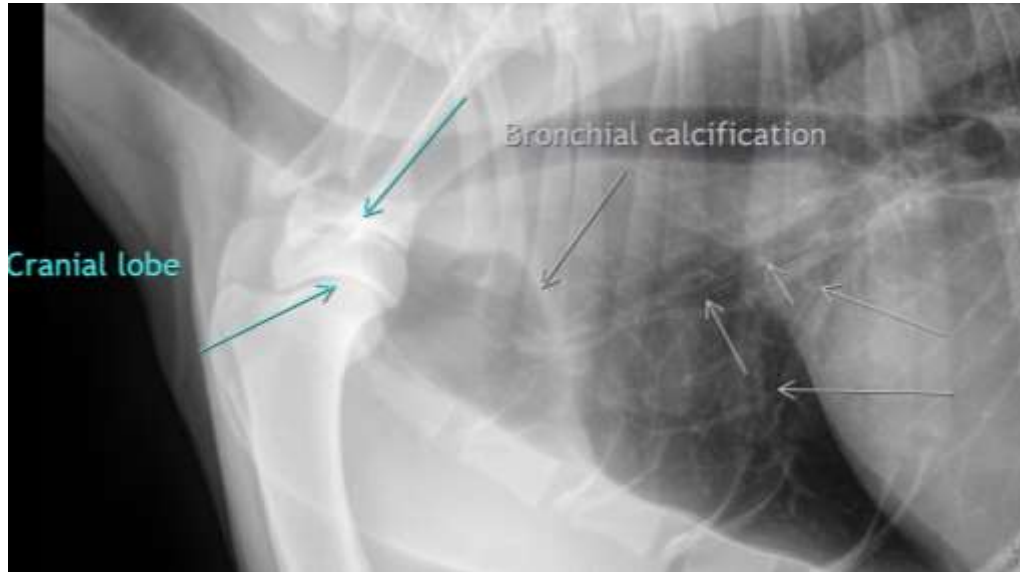
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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