



PATIENT

Zabriskie Zeigler

PRESENTING CLINICAL SIGNS

Presents for not eating and lethargy Did not eat this morning, O had to hand feed a couple pieces of soaked kibble. Trembling and lethargic this morning. Increased respiratory rate. Was normal yesterday.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: General: QAR; euhydrated; BCS 5/9 Nose/throat: No nasal discharge; normal throat palpation Cardiovascular: Grade 3-4 systolic murmur, difficult to hear over lung sounds Respiratory: Crackles, increased bronchovesicular sounds in all quadrants, increased resp effort Musculoskeletal: Ambulatory x 4; adequate musculature

BREED

Pomeranian

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views of the thorax totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

SEX

MN

The degree of pulmonary inflation is fair on all available images. A severe generalized increase in pulmonary opacity is seen with predominance of an interstitial pattern with peribronchial accentuation.

AGE

7 Years

No evidence of pleural effusion or concurrent lymphadenomegaly is noted.

Redundancy of the dorsal tracheal ligament is noted.

There is esophageal and gastric aerophagia.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The thoracic boundaries present within normal limits.

The cardiac silhouette appears to be mildly enlarged. The vertebral heart score however is 10.2 which is within the reference range. No evidence of vascular lung pattern and no evidence of cardiogenic pulmonary edema is seen.

HOSPITAL NAME

Northshore
Veterinary Hospital

RADIOGRAPHIC DIAGNOSIS

- Diffuse interstitial lung pattern with peribronchial accentuation.
- Redundant dorsal tracheal ligament.

REFERRING VET

Brita Kiffney

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings suggest presence of diffuse interstitial lung disease. Differential diagnosis includes interstitial pneumonia, pneumonitis, fibrosis/bronchiolitis obliterans, and noncardiogenic pulmonary edema including acute respiratory distress syndrome. Diffuse infiltrative disease such as with round cells cannot be ruled out entirely but is thought by far less likely.

INVOICE

56169

A cardiac echo could be considered in order to determine the presence of pulmonic hypertension/cor pulmonale. Airway endoscopy with airway sampling could be considered for further definition as well depending on the clinical course of the disease.

DATE

1-12-23

There is no evidence of congestive cardiac failure.



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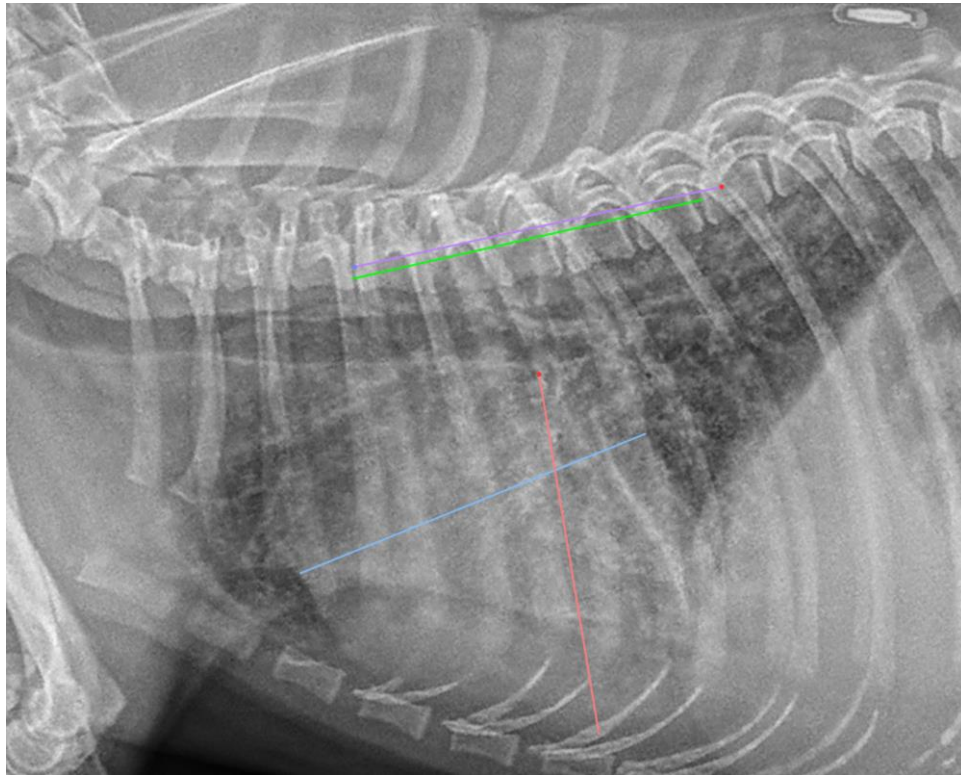
Brita Kiffney

INVOICE

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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.

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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