



**PATIENT PRESENTING CLINICAL SIGNS**

Hunter Cole James states they were in Kentucky on Friday evening when Hunter started drinking a lot of water. James states he vomited at a rest stop, vomited at the next rest stop, then had very liquid diarrhea when James wife took Hunter out. James states whe they returned on Friday evening Hunter was very lethargic but thought it was from the trip. James states the did take Hunter to AESC over the weekend and they did bloodwork but no radiographs oR US since they did not have a radiologist. James stated they prescribed antibiotics and antinausea medication that they're finding difficult to give Hunter since he's not eating. James stated Hunter hs been very lethargic and just laying around at home unless they make him go outside. James also mentioned Hunter has been panting a lot more lately. Jame states Hunter refuses to eat but did eat a couple of bites of chicken and rice last night. Jame stated tHe last time Hunter vomited was in the car on the way here this morning.

**SPECIES**

Canine

**BREED**

Pit Bull Terrier Mix

**SEX**

Neutered Male

**AGE**

11 Years, 4 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Elizabeth Animal  
Hospital

**REFERRING VET**

Leon Anderson, DVM

Abnormal PE/Chem/CBC/UA Results: Mucous Membranes Pink, moist, CRT <2 seconds MILD PTYALISM Hydration Adequate based on mucous membranes and skin turgor. Abdomen TENSE, FULL, PAINFUL ABDOMEN. Rectal examination NORMAL. Cardiovascular/ Respiratory TACHYcardic AT 190 BPM ON HR. No murmur or arrhythmia. Lungs auscult normally. Eupnic.

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**RADIOGRAPHIC FINDINGS**

Mild T5/6 spondylosis is seen.

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape and there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and opacity. The intrapulmonary vascular branching is seen up to the third order lung vessels.

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The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

**DATE**

10-8-21

**RADIOGRAPHIC DIAGNOSIS**

- Normal age related thorax.



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study of the thorax reveals no significant structural changes of the cardiovascular and bronchopulmonary system. There is no evidence of mediastinal widening. The findings are considered within age related normal limits.

**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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