



**PATIENT**

Bella Stempien

**PRESENTING CLINICAL SIGNS**

Patient presented as a recheck for potential kennel cough, dry hacking cough consistently every 10 minutes with flem producing Was started 2 days ago on doxycycline and temeril P. Owner states no improvement but still BAR

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

Right/left lateral and ventrodorsal views of the thorax and lateral view of the abdomen totaling 4 images available for review.

**BREED**

Labrador Retriever

Thoracic read requested.

**SEX**

FS

The sternum is shortened.

The extrathoracic soft tissues present homogeneous without abnormalities.

**AGE**

8 Months

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.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

Mild generalized dilation of the esophagus is seen on all available images.

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

**HOSPITAL NAME**

Boca Park Animal  
Hospital

There is a moderate bronchointerstitial lung pattern with caudodorsal and caudoventral accentuation and marked peribronchial cuffing.

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

**REFERRING VET**

Dr. Corinna Gorgon

**RADIOGRAPHIC DIAGNOSIS**

- Esophageal dilation.
- Moderate active lower airway pattern.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

47754

The esophageal dilation may be incidental; however, megaesophagus and/or esophageal dysmotility as well as esophagitis and gastroesophageal reflux should be ruled out. There is no evidence of aspiration pneumonia at this point. However, careful feeding from an elevated position could be considered.

**DATE**

10-9-21

The lung pattern supports the history of infectious bronchitis. Bacterial, viral, and/or mixed infection appears most likely. However, parasitic and protozoal infection cannot be ruled out. Eosinophilic and irritant bronchitis appear to be unlikely in light of the patient's history.



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**BREED**

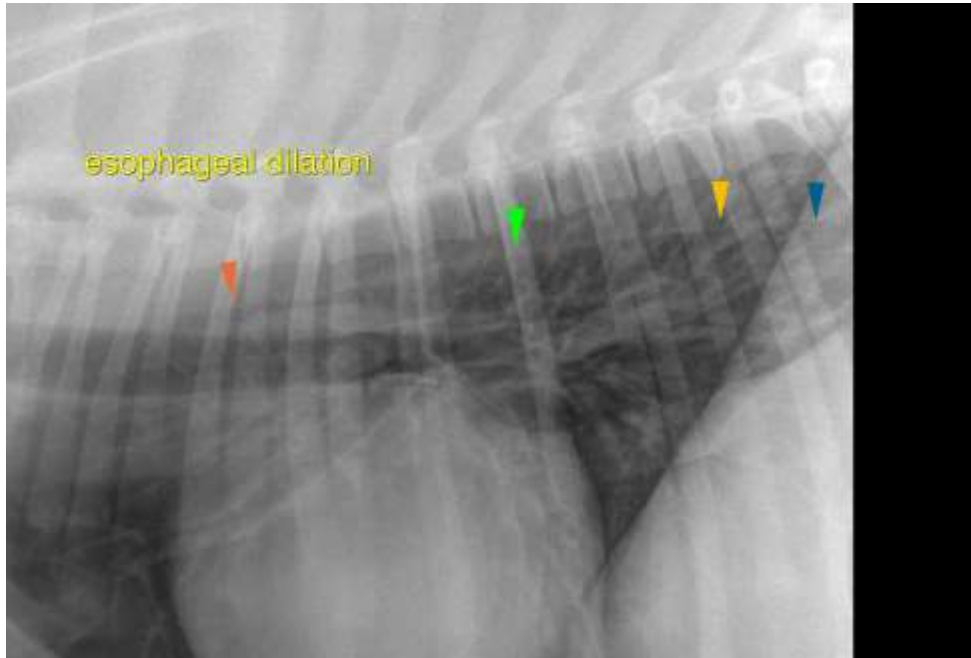
Labrador Retriever

**SEX**

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**AGE**

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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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