



**PATIENT**

Miss Itsy Bitsy Shaw

**PRESENTING CLINICAL SIGNS**

Labored breathing noted last week- diagnosed with pleural and pericardial effusion on tfast/echocardiogram, no obvious heart mass noted on echo  
Abnormal PE/Chem/CBC/UA Results: tachypnea

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**BREED**

Chihuahua

**RADIOGRAPHIC FINDINGS**

There is moderate cardiomegaly with globoid appearance of the heart. No evidence of pulmonary venous or arterial congestion is seen. The trachea is elevated. The vertebral heart score is 11.2.

**SEX**

FS

The degree of retraction of the lung lobes from the thoracic wall appears to be very mild.

Mild pleural fissure lines are seen in the left caudal hemithorax.

**AGE**

10 Years

No evidence of structural pulmonary disease is seen other than mild generalized increase in interstitial opacity of the right middle lung lobe which is most likely representing atelectasis.

The stomach is post-prandial.

No evidence of abnormality of the liver is seen.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**RADIOGRAPHIC DIAGNOSIS**

- Mild to moderate cardiomegaly with globoid appearance of the cardiac silhouette.
- No evidence of structural pulmonary disease.
- Mild pleural effusion.

**HOSPITAL NAME**

Animal Health  
Partners

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic findings are compatible with the history of pericardial and mild pleural effusion. No evidence of structural pulmonary or mediastinal pathology is seen.

**REFERRING VET**

Guest

The enlargement of the cardiac silhouette is assumed to be due to presence of pericardial effusion. The changes are not typical for left sided or right sided cardiomegaly. However, a detailed assessment of the heart including structure and function by means of a full cardiac echo should be considered if not performed already. Furthermore, aspiration and analysis of the pericardial and pleural effusion, if possible, may help to further define the etiology. Transudate, modified transudate, and exudate all are a potential; however, owing to the presence of bicavitary effusion, infiltrative pathology is a specific consideration. Idiopathic and hemorrhagic effusion with bicavitary appearance are rare.

**INVOICE**

48679

**DATE**

11-29-21



**PATIENT**

Miss Itsy Bitsy Shaw

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

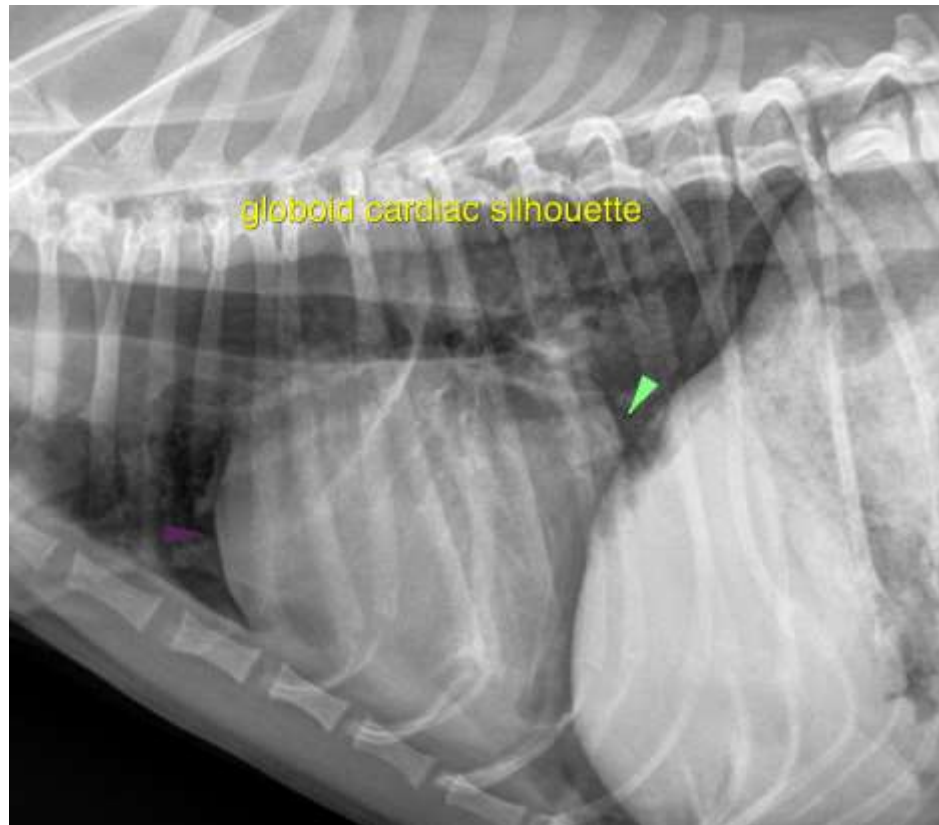
FS

**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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