

**PATIENT**Ghost/Oreo Shake
Sarsfield**PRESENTING CLINICAL SIGNS**

History of pneumonia, radiographs taken 10/31/22 showing consolidation of the right cranial lung lobe-scar tissue vs abscess vs other. Did a round of Enrofloxacin and Doxycycline, finished ~10 days prior to today. No respiratory signs at home.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies available for review.

BREED

Mixed Breed

COMPUTED TOMOGRAPHIC FINDINGS

Multilobar atelectasis of the right middle, accessory, and left cranial lung lobe (caudal subsegment) is seen in combination with cylindrical bronchiectasis. Focal subpleural interstitial scarring is seen within the ventral contour of the right cranial lung lobe. The remainder of the lung is aerated and presents no evidence of structural changes. Multiple interstitial bands are seen throughout the lung.

SEX

Male Intact

The mediastinal lymph nodes present within normal limits.

No evidence of cardiovascular pathology is seen.

AGE

3 Years

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multilobar atelectasis and bronchiectasis.
- Subpleural interstitial infiltrates in the right cranial lung lobe.

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study reveals atelectasis of the right middle, left cranial, and accessory lung lobes in combination with multiple bronchiectasis. Acquired lobar atelectasis secondary to bronchopneumonia is a potential as well as congenital disease such as mucociliary dyskinesia or bronchomalacia. The atelectatic changes are very likely to be irreversible and further progression cannot be ruled out.

HOSPITAL NAMECatskill Veterinary
Services, PLLC

There is evidence of multifocal interstitial scarring which further prompts the suspicion of interstitial involvement such as with pneumonitis interstitial lung disease, interstitial fibrosis, or interstitial pneumonia. Primarily infectious disease such as viral, bacterial, or parasitic should be ruled out by means of endoscopy with airway sampling if not performed already.

REFERRING VETDr. Joseph
D'Abbraccio**INVOICE**

55461

DATE

11-29-22



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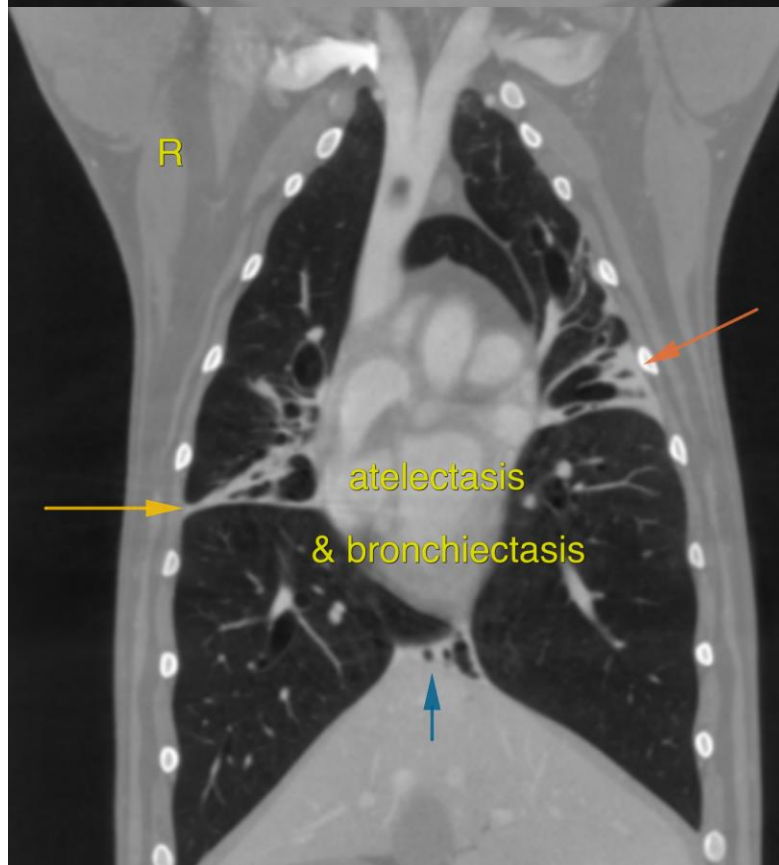
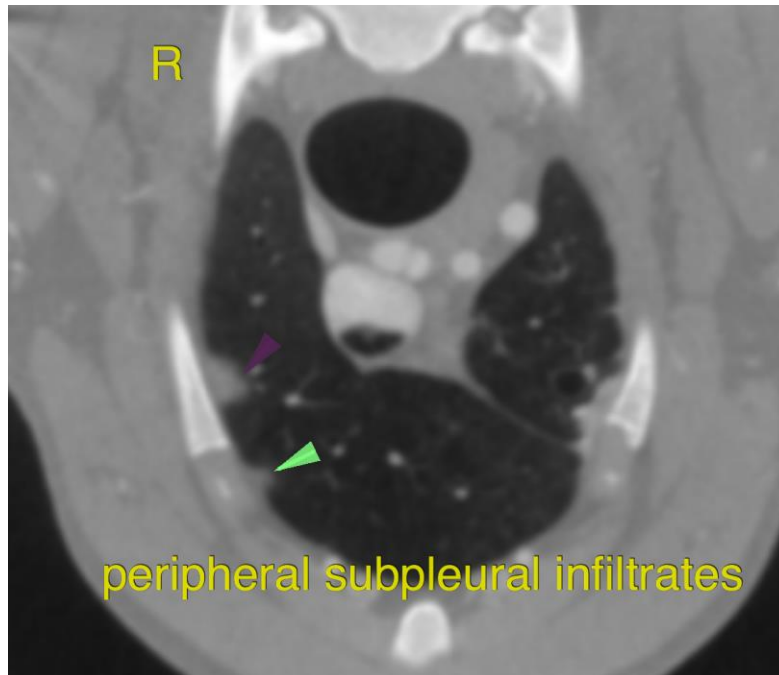
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Mixed Breed

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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
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