



PATIENT

Pepper III Corey

PRESENTING CLINICAL SIGNS

Presented for cough. Worse when going upstairs. No change in activity. EDUD WNL. Abnormal PE/Chem/CBC/UA Results: Crackles in all lung fields Cough elicited on tracheal palpation Grade III/VI RAS murmur Pink<2 BCS 9/9

SPECIES

CA

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and dorsoventral views totaling 4 images available for review.

BREED

Scottish Terrier

RADIOGRAPHIC FINDINGS

Mild spondylosis deformans at T4/5 is seen.

SEX

MN

There appears to be deformity of the radius in one of the front limbs which may indicate presence of malunion and angular limb deformity. Clinical correlation required.

AGE

11

There is mild left sided cardiomegaly with left atrial tenting and loss of the caudal cardiac waist. The vertebral heart score is 11.3. Mild elevation of the trachea is seen. There is a mild generalized vascular lung pattern. No evidence of cardiogenic pulmonary edema is seen; however, there is a moderate generalized bronchial lung pattern with peribronchial cuffing which presumably is enhanced by the relatively fair degree of pulmonary inflation.

Redundancy of the dorsal tracheal ligament is noted accentuating the cervical trachea.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Moderate gastric aerophagia is seen in a post-prandial stomach.

The liver presents mild generalized enlargement. There appears to be mineral opaque material in the anatomic position of the gallbladder.

HOSPITAL NAME

Torch Lake
Veterinary Clinic

RADIOGRAPHIC DIAGNOSIS

- Moderate active chronic lower airway pattern.
- Mild left sided cardiomegaly without evidence of congestive heart failure.
- Redundancy of the dorsal tracheal ligament suggesting potential for dynamic tracheal disease.
- Hepatomegaly.
- Aerophagia.
- Spondylosis.
- Suspect biliary microlithiasis.

REFERRING VET

Adrienne Waffle

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

48686

The radiographic study reveals evidence of chronic active bronchopulmonary disease. Eosinophilic/allergic and irritant bronchopneumopathy are a potential; however, infectious bronchitis such as viral, bacterial, and less likely parasitic, or protozoal cannot be ruled out as a differentia diagnosis. Further definition would ideally be achieved by means of airway endoscopy with airway sampling which also could allow for assessment of the upper airways including further verification of presence of dynamic tracheal disease. No true collapse is seen throughout the available radiographic exposures.

DATE

12-1-21

Myxomatous mitral valve degeneration is the most likely underlying cause of the mild



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cardiomegaly with mild left atrial enlargement. It appears unlikely that this is the underlying cause of the current clinical signs yet further definition by means of a full cardiac echo is recommended if available.

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Differential diagnosis for the hepatomegaly includes endocrine/metabolic hepatopathy. Diffuse infiltrative pathology such as inflammatory/infectious and neoplastic cannot be ruled out. Correlate with the laboratory values to determine the need for further definition by means of ultrasound and parenchymal sampling or liver function test.

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REFERRING VET

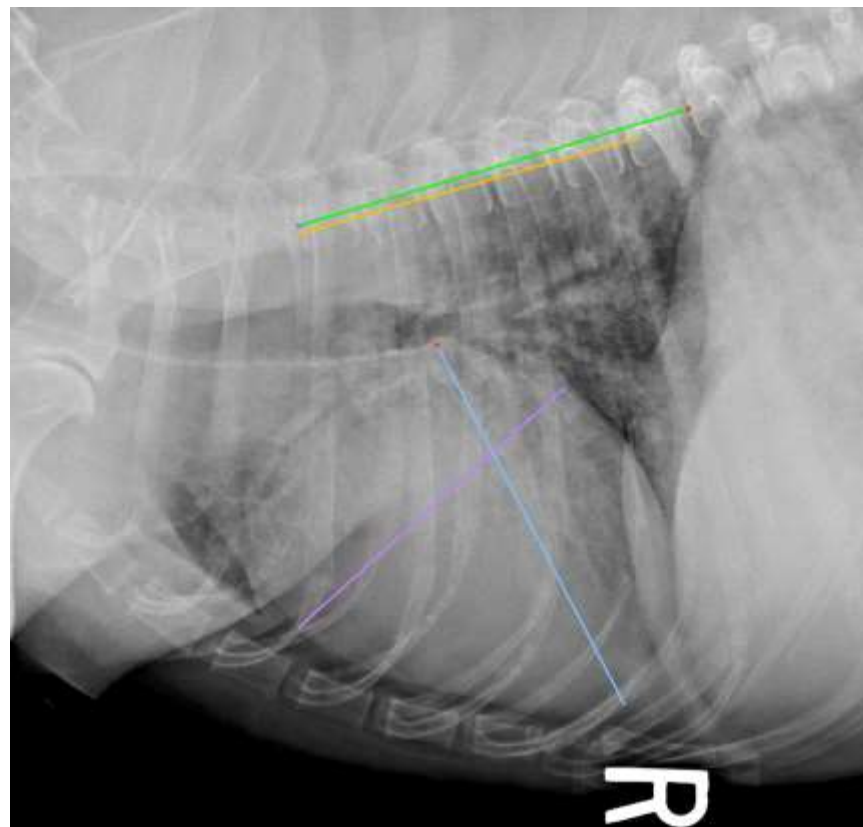
Adrienne Waffle

INVOICE

48686

DATE

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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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