



PATIENT

Lady Lind

PRESENTING CLINICAL SIGNS

RDVM History: O says she is still coughing/hacking/sneezing spasms and potentially getting worse. No improvement was seen with antibiotics sent home from urgent vet so we discussed less likely infectious vs. not responding to that antibiotic. Discussed chronic bronchitis. Went over thoracic radiograph review, signs of chronic bronchitis but could also be age related change. There is an additional sign of chronicity. Discussed management of chronic bronchitis with bronchodilators (theophylline) +/- anti-inflammatories (prednisone). Harsh sneezing. No nasal discharge. Intermittent stridor. No cough elicited upon palpation of trachea. Clear lung sounds; no increased effort. Sneezing, respiratory stridor - OPEN r/o tracheal collapse, nasal sinus disease (sinusitis, neoplasia), elongated soft palate, other Grade 2/4 dental calculus ~15-20% over ideal body condition score Theophylline Compounded Capsules: 150 mg x 90. Give 1 cap PO TID Hydroxyzine HCL 25 mg: Give 1 tablet by mouth every 8-12 hours. Abnormal PE/Chem/CBC/UA Results: NSF on CBC/Chem/UA

SPECIES

Canine

BREED

Beagle Mix

SEX

FS

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Plain and post contrast studies of the head and post contrast studies of the thorax available for review.

AGE

8 Years

COMPUTED TOMOGRAPHIC FINDINGS

Head

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

Moderate mucosal swelling of the nasal lining is seen in both nasal cavities. There is a mild amount of fluid adhering to the nasal turbinates. Mild turbinate destruction is seen within the rostral and mid third of the left nasal cavity. There is swelling of the mucosal lining of both frontal sinuses with a mild amount of fluid accumulating in the right and a moderate amount of fluid accumulating in the left frontal sinus.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The left external auditory meatus presents mild generalized thickening of its epithelial lining. The right auditory meatus presents within normal limits.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

The salivary glands present within normal limits.

The visible dentition is within normal limits.

Thorax

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Mobile Pet Imaging
CFL

REFERRING VET

Borecky

INVOICE

49108

DATE

12-16-21

**PATIENT**

The bony and surrounding soft tissue structures are within normal limits.

Lady Lind

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5 , the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

SPECIES

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Canine

Mild redundancy of the tracheal membrane is seen in the cervical trachea.

BREED

A mild generalized bronchial pattern with even distribution throughout the lung is noted.

Beagle Mix

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

SEX**COMPUTED TOMOGRAPHIC DIAGNOSIS**

FS

- Moderate bilateral mildly destructive rhinosinusitis.
- Redundancy of the dorsal tracheal ligament.
- Mild bronchial lung pattern.

AGE**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

8 Years

The CT findings are compatible with mildly destructive chronic rhinosinusitis. Differential diagnosis includes infectious rhinitis such as viral, bacterial, or mixed and less likely allergic rhinitis. There is no evidence of foreign material, a nasal mass, or there are no typical signs for fungal rhinitis. Final diagnosis will required sampling and culture.

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Redundancy of the dorsal tracheal ligament can be an incidental finding; however, it can be associated with dynamic tracheal disease.

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The mild bronchial lung pattern is likely to be within age related normal limits. Mild chronic lower airway disease such as eosinophilic bronchopneumopathy or infectious bronchitis cannot be ruled out entirely.

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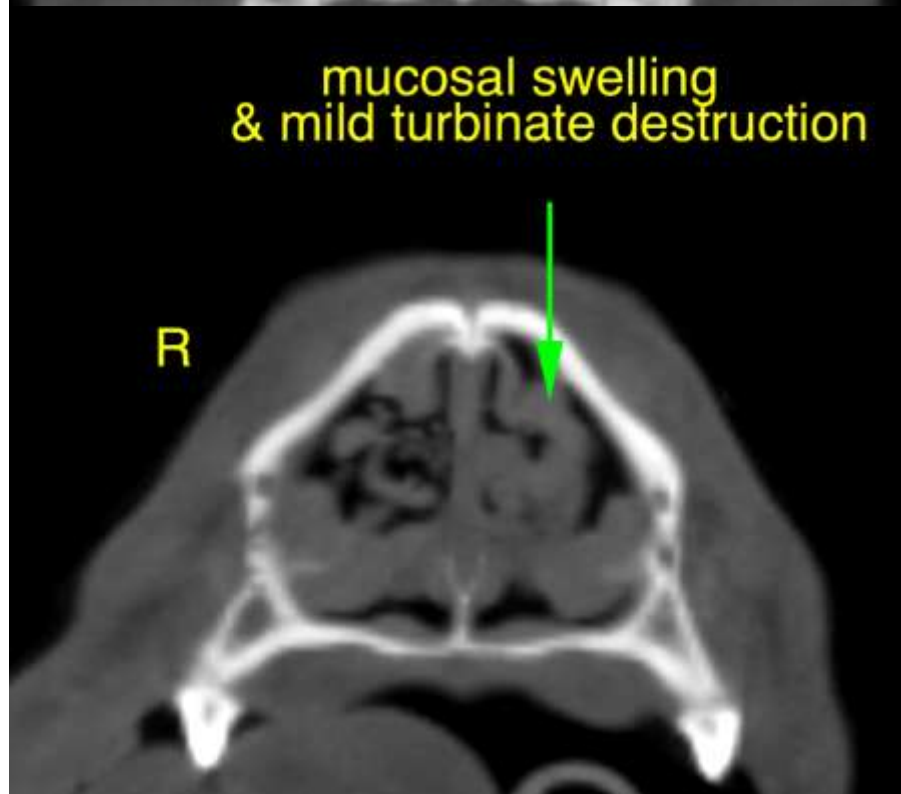
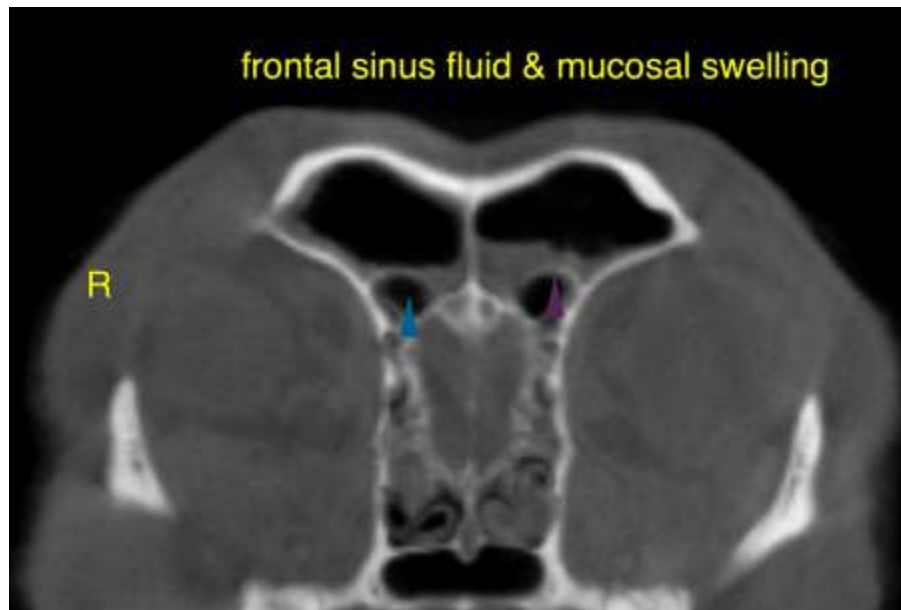
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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BREED

Beagle Mix

SEX

FS

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8 Years

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