



PATIENT

Jack Weldon

PRESENTING CLINICAL SIGNS

Chronic intermittent cough for over a year. 2/23/22 seen at Rdvm for trouble breathing bad cough again for 1-3 days. On hydrocodone. Chest rads completed rdvm sent over this am before scan. Culture and cbc/chem bloodwork pending.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: See attached history

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies available for review.

BREED

Yorkshire Terrier

COMPUTED TOMOGRAPHIC FINDINGS

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.

SEX

MN

The cardiovascular structures including the pulmonary vasculature are within normal limits. The main pulmonary artery diameter equals the diameter of the aorta. No significant enlargement of the main pulmonary artery is seen. There is no evidence of filling defects within the main pulmonary right artery or the right and left main pulmonary arterial branches.

AGE

11 Years

The intrathoracic trachea presents no significant flattening, however, mottled dorsoventral flattening of the cervical trachea is seen.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Moderate atelectatic changes are seen in the dependent and dorsal lung. Mild multifocal cylindrical bronchiectasis of the 1st and 2nd order bronchi is seen. There is no evidence of peribronchial or peripheral pulmonary infiltrates.

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

HOSPITAL NAME

Stone Cottage
Veterinary Hospital

The liver appears to be enlarged; however, the organ is not fully included in the scan.

A moderate amount of mineral attenuating sediment is seen in a dependent position within the gallbladder and cystic duct.

REFERRING VET

Spaccarelli

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate cervical tracheal collapse.
- Bronchial pattern with mild multifocal cylindrical bronchiectasis.
- Hepatomegaly.
- Biliary microlithiasis.

INVOICE

50553

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

2-24-22

The CT study reveals no evidence of pulmonary thromboembolism. Moderate cervical tracheal collapse is seen and likely secondary to degenerative bronchomalacia. No significant dynamic tracheal disease or bronchial collapse is seen; however, there is a mild lower airway pattern with early multifocal cylindrical bronchiectasis supporting the presence of chronic lower airway disease such as eosinophilic / allergic bronchopneumopathy versus infectious bronchitis



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including viral, bacterial, and less likely parasitic or protozoal. Consider upper and lower airway endoscopy for a morphological functional assessment and airway sampling.

SPECIES

Canine

Differential diagnosis for the hepatomegaly includes metabolic/endocrine hepatopathy. Diffuse neoplastic or inflammatory/infectious infiltrates can never be ruled out entirely. Correlate with the laboratory values and consider ultrasound and parenchymal sampling if indicated.

BREED

Yorkshire Terrier

SEX

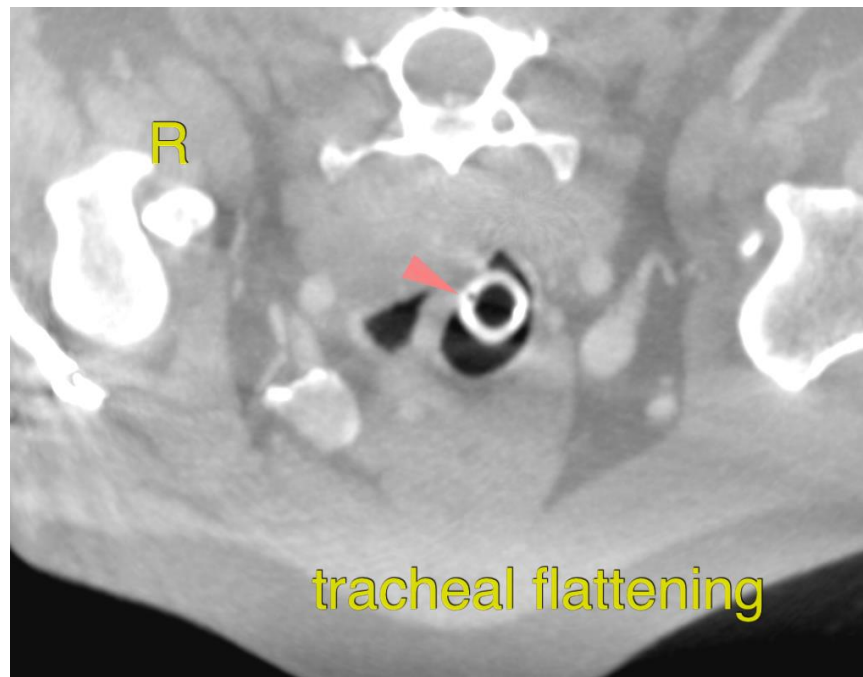
MN

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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.

REFERRING VET

Spaccarelli

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com

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