



PATIENT

Rubia Pavlovic

PRESENTING CLINICAL SIGNS

April 6: lethargic, shaking, vomiting white foam (started this morning; about 7 times), passing very loose/diarrhea stools; yesterday afternoon was hot inside the house, O gave water and she kept it down. O said that Rubia collapsed yesterday on her walk. April 11: came today for a check and follow up x-ray. recheck thoracic radiograph at appropriate clinical intervals to assess resolution of bronchopneumonia/ aspiration pneumonia

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: heartworm disease was positive (treated by simparica trio), was negative for last year but was positive for today's visit eosinophilia neutrophilia

BREED

Labrador Mix

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views totaling 6 images available for review.

SEX

Female

RADIOGRAPHIC FINDINGS

A mild residual cranioventral alveolar lung pattern is noted with an airbronchogram within the right cranial lung lobe. The remainder of the lung reveals a mild diffuse interstitial pattern with reticular distribution. Mild generalized bronchial wall enhancement is noted.

AGE

3 Years

Course and width of the trachea are considered within normal limits.

There is no evidence of pleural effusion or mediastinal widening.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The radiographic presentation of the cardiovascular structures is within normal limits. There is no evidence of pulmonary arterial enlargement.

Mild gastric aerophagia is seen.

HOSPITAL NAME

Truscott Animal
Hospital

RADIOGRAPHIC DIAGNOSIS

- Mild residual cranioventral alveolar lung pattern and mild diffuse bronchointerstitial lung pattern.

REFERRING VET

Dr. Medhat Meawad

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a mild residual cranioventral alveolar lung pattern accentuating the right cranial lung lobe. The remainder of the lung reveals a mild generalized bronchointerstitial pattern. Radiographic clearing of the pulmonary parenchyma may lag behind the clinical signs; however, continuation of the initiated treatment beyond the radiographic clearing could be considered in this patient.

INVOICE

51455

DATE

4-11-22



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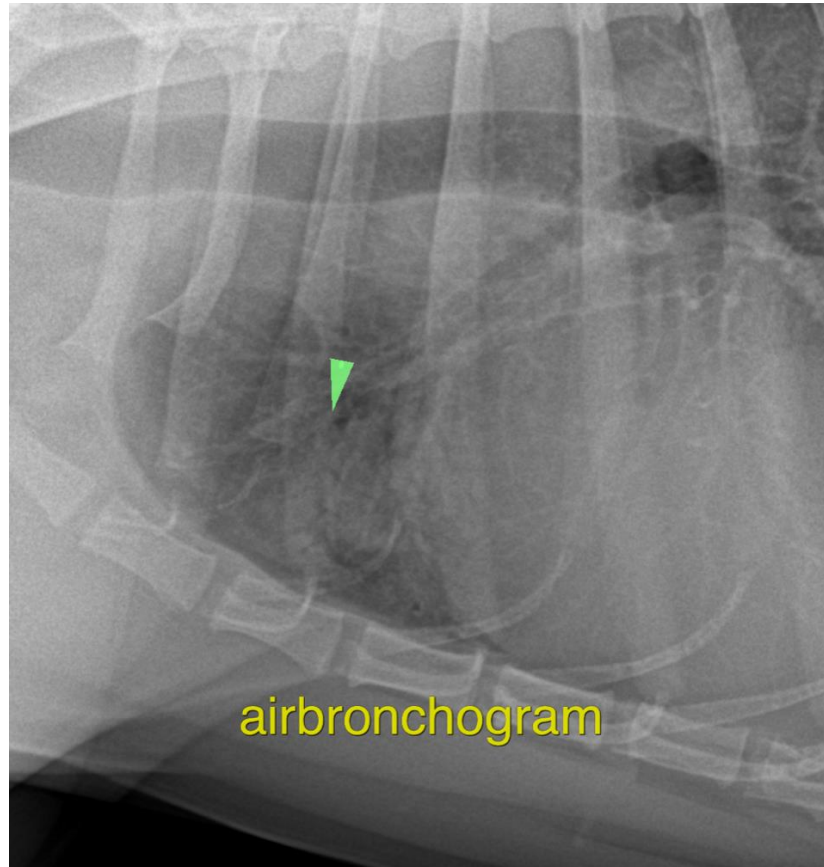
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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