



PATIENT

Snowy Oh

SPECIES

Canine

BREED

Husky X

SEX

FS

AGE

9 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Health
Partners

REFERRING VET

Dr. Ashley Gold

INVOICE

59353

DATE

7-13-23

PRESENTING CLINICAL SIGNS

9 yo Husky X with chronic coughing lifelong. Responded to Vanectyl-P (steroid containing medication). Off this for a month, cough is much worse. Performed CT scan first, then proceeded with bronchoscopy and BAL. Increased mucus seen in airways on bronchoscopy (particularly R accessory lobe and L cranial lung lobe). Blood seen coming from R cranial lung lobe. R/o chronic bronchitis, eosinophilic bronchopneumopathy, other
Abnormal PE/Chem/CBC/UA Results: Coughing noted. No crackles or wheezes. Previous blood work 1 month ago was essentially normal (aside from mildly low lymphocytes_

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain study in soft tissue and lung windows available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A severe generalized bronchial lung pattern with peribronchial cuffing and multifocal peripheral cylindrical bronchiectasis is seen. The pulmonary interstitium presents mild diffuse ground glass attenuation.

The mediastinal lymph nodes present within normal limits.

No significant cardiovascular changes are seen. Incidental mineralization of the aortic annulus is noted.

The thoracic boundaries present within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe chronic generalized bronchial lung pattern with peribronchial cuffing and multifocal cylindrical bronchiectasis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are compatible with severe chronic active lower airway disease. The presence of bronchiectasis is typically associated with decreased mucociliary clearance rates and predisposes to recurring inflammation/infection and superinfection. General differential diagnosis includes eosinophilic bronchopneumopathy (pulmonary infiltrates with eosinophils) as well as infectious bronchitis such as viral, bacterial, or parasitic. Allergic airway disease is considered more likely based on the patient history in combination with the CT findings. However, correlation with the results of the BAL is required.



PATIENT

Snowy Oh

SPECIES

Canine

BREED

Husky X

SEX

FS

AGE

9 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Health
Partners

REFERRING VET

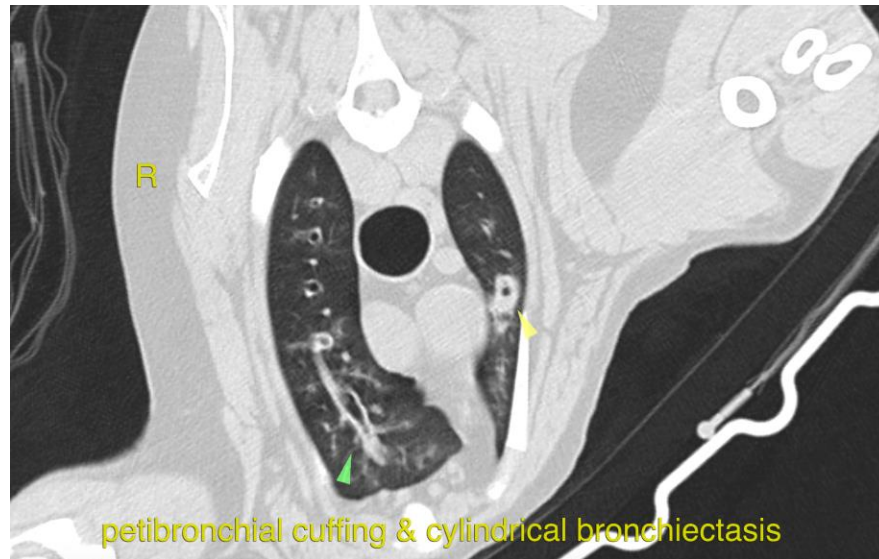
Dr. Ashley Gold

INVOICE

59353

DATE

7-13-23



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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
info@sonopath.com