



**PATIENT**

Skippey Finney

**SPECIES**

Canine

**BREED**

Jack Russell Terrier

**SEX**

NM

**AGE**

13 Years, 9 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

Dr. Feldt

**INVOICE**

52968

**DATE**

7-19-22

**PRESENTING CLINICAL SIGNS**

Reason for Visit: Patient developed seizures History: 13yr 9m old NM jack russell terrier presented for seizures. O kept a journal with times + symptoms (very helpful). First seizure was 1 month ago, second was yesterday and last one was this morning at 4:00am. Os describe Ps symptoms patterned as panting, out of breath, collapsing, and body becomes stiff and patient is unconscious. Episodes last around 1-2 minutes and P will be lethargic after. (15-20 min post ictal period) P is only on Vetmedin, stopped hycodan . Os say hycodan did not help with cough (previous visit)

Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: cataracts OU Oral Cavity: mm pale pink Lymph Nodes: N Skin: N CV/Respiratory: 5/6 left sys murmur, crackles bilaterally Abd/GI: N Uro/Perineum: N Musculoskeletal: N Neurological: N

**RADIOGRAPHIC STUDY OF THE THORAX**

Right lateral and dorsoventral views of the thorax totaling 2 images available for review.

**RADIOGRAPHIC FINDINGS**

Severe left sided cardiomegaly with a vertebral heart score of 14.5, loss of the caudal cardiac waist, and left atrial tenting are seen. There is a double opacity sign of the left atrium in the orthogonal view. Splitting of the mainstem bronchi is noted. The lung is hypervascular. No evidence of cardiogenic pulmonary edema is seen. The trachea is elevated owing to the basico-apical enlargement of the cardiac silhouette. The width of the trachea presents within normal limits otherwise.

Multiple cervical and thoracic spondyloses are seen.

There is moderate gastric aerophagia in a postprandial stomach.

**RADIOGRAPHIC DIAGNOSIS**

- Severe left sided cardiomegaly with pulmonary venous dilation and no evidence of cardiogenic pulmonary edema.
- Multiple spondyloses.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

At this time, there is no radiographic evidence of congestive heart failure. However, incipient failure is considered likely based on the radiographic findings. Consider myxomatous degeneration of the mitral valve with chronic mitral valve regurgitation a likely potential in this patient. However, further definition and detailed staging require a full cardiac echo which could be considered if not performed already.



**PATIENT**

Skippey Finney

**SPECIES**

Canine

**BREED**

Jack Russell Terrier

**SEX**

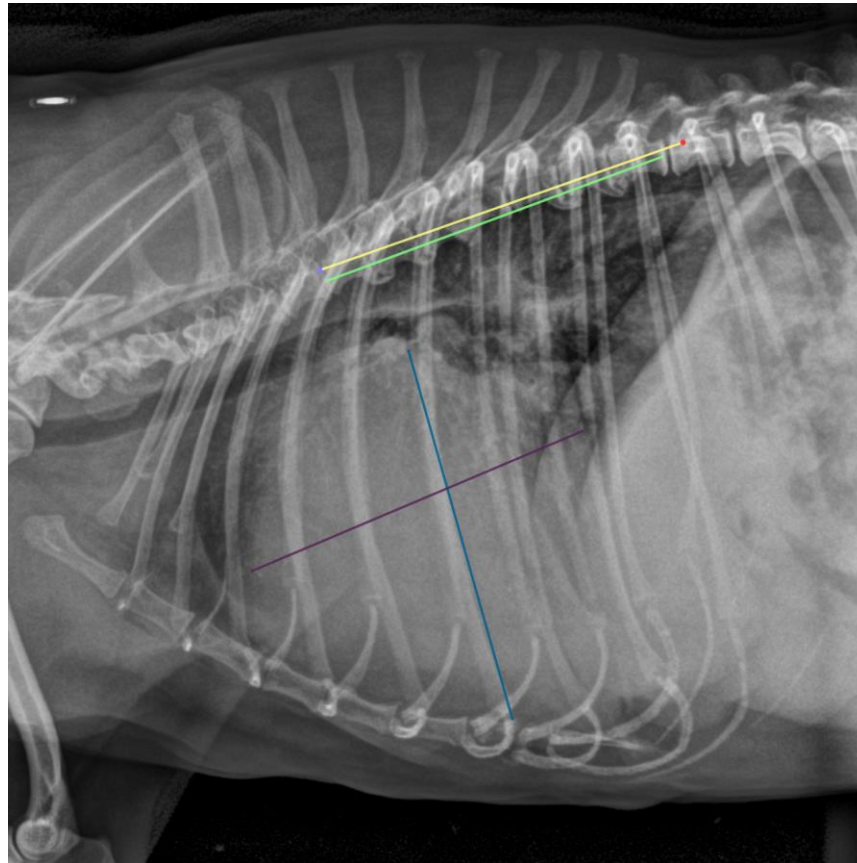
NM

**AGE**

13 Years, 9 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI



**HOSPITAL NAME**

DPC Veterinary  
Hospital

**REFERRING VET**

Dr. Feldt

**INVOICE**

52968

**DATE**

7-19-22

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  
Nele.Eley@sonopath.com