



PATIENT

Bella Hogan

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

8 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Northshore
Veterinary Hospital

REFERRING VET

Sophie Lee, DVM

INVOICE

53413

DATE

8-10-22

PRESENTING CLINICAL SIGNS

Mass removal in 2018 with deep margins due to malignancy on left lateral thorax left a 10 cm deep fibrous scar running from caudodorsal scapula to ventrolateral ribs. Surgery records are unavailable so mass type is unknown, however O says it was malignant. Over the last year the pet has been kicking at the left side of her body and seems intermittently reactive to scar palpation. No response to gabapentin was seen. Interestingly, she has not been doing it when wearing a jacket-style harness.
Abnormal PE/Chem/CBC/UA Results: All WNL prior to dental in June 2022

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views of the thorax totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

The patient is mildly obese.

The left thoracic wall appears to be slightly thinner and mild opacification of the cranial left thoracic wall is seen caudal to the left thoracic limb.

Pulmonary inflation is moderate. A mild generalized bronchointerstitial lung pattern is noted and considered within age related normal limits. There is no evidence of pulmonary nodules or masses.

No mediastinal widening is seen.

The cardiovascular structures present normal limits. The vertebral heart score is 10.

Mild tracheal collapse is noted in the caudal cervical trachea on the left lateral view only.

RADIOGRAPHIC DIAGNOSIS

- Normal age related bronchopulmonary findings.
- No evidence of pulmonary metastases.
- Suspect dynamic tracheal disease.
- Structural changes in the left craniolateral thoracic wall compatible with the history of prior surgery.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings of the bronchopulmonary structures are considered within age related normal limits. No evidence of pulmonary nodules or masses is seen. There is no radiographic evidence of cardiovascular pathology.

Consider the potential of dynamic tracheal disease. Clinical correlation required.



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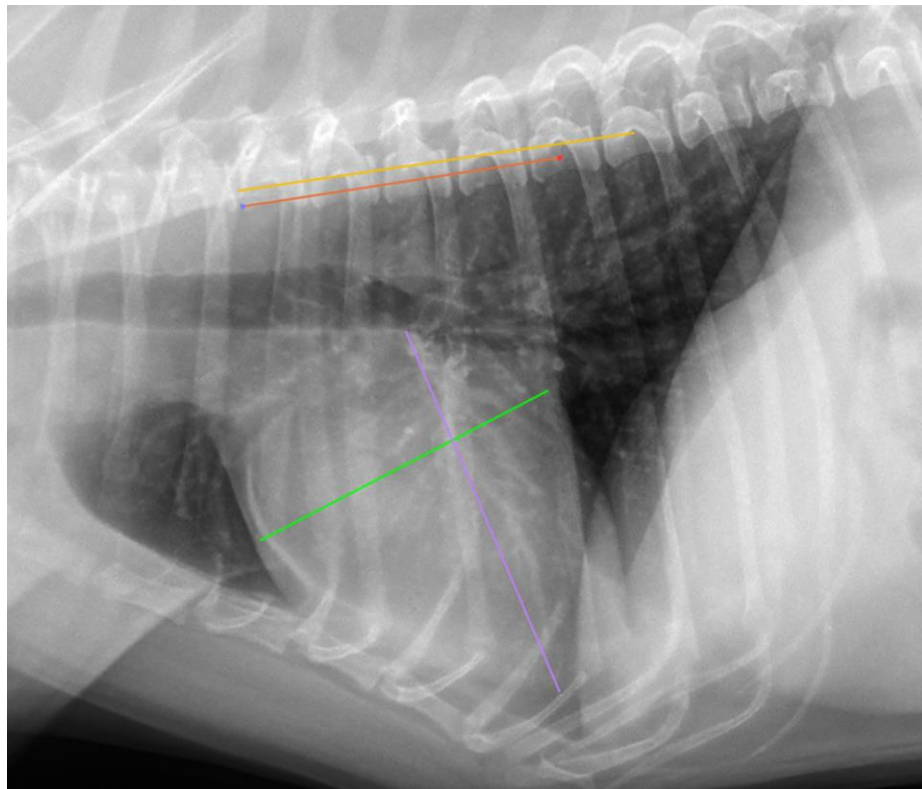
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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