



PATIENT

Chico Li

PRESENTING CLINICAL SIGNS

G1 heart murmur. Coughing on and off for one year. Olive sized mass on the ventral thorax.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Right/left lateral and ventrodorsal views of the thorax and abdomen totaling 6 images available for review.

BREED

Miniature Poodle

RADIOGRAPHIC FINDINGS

Thorax

The degree of pulmonary inflation is fair. A moderate generalized bronchial lung pattern with mild multifocal cylindrical bronchiectasis is seen.

SEX

M

Flattening of the mid cervical trachea is seen on the left lateral view. The trachea height is normal on the right lateral view.

AGE

14 Years

The vertebral heart score is 10. No specific chamber enlargement of the cardiac silhouette is noted.

Abdomen

The patient is obese.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Prominent new bone formation is present in the costochondral junction.

L2/3, L5/6, L7/S1 spondylosis deformans is noted.

Moderate generalized enlargement of the liver is seen.

HOSPITAL NAME

Truscott Animal
Hospital

RADIOGRAPHIC DIAGNOSIS

- Moderate generalized bronchial lung pattern with multifocal cylindrical bronchiectasis.
- Normal radiographic presentation of the cardiac silhouette.
- Potential for dynamic tracheal disease.
- Obesity.
- Moderate hepatomegaly.
- Spondylosis deformans.

REFERRING VET

Dr. Mena Abdelsayed

INVOICE

53414

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study suggests potential for dynamic tracheal disease as well as presence of chronic lower airway disease such as eosinophilic bronchopneumopathy or infectious bronchitis including viral, bacterial, and less likely parasitic. A clinical trial of treatment for bronchitis could be considered versus airway endoscopy with airway sampling for further definition.

DATE

8-10-22

Differential diagnosis for the hepatomegaly includes metabolic/endocrine hepatopathy, diffuse inflammation or infection, and diffuse neoplastic infiltrate. Correlate with the laboratory values and consider abdominal ultrasound with eventual parenchymal sampling if indicated.



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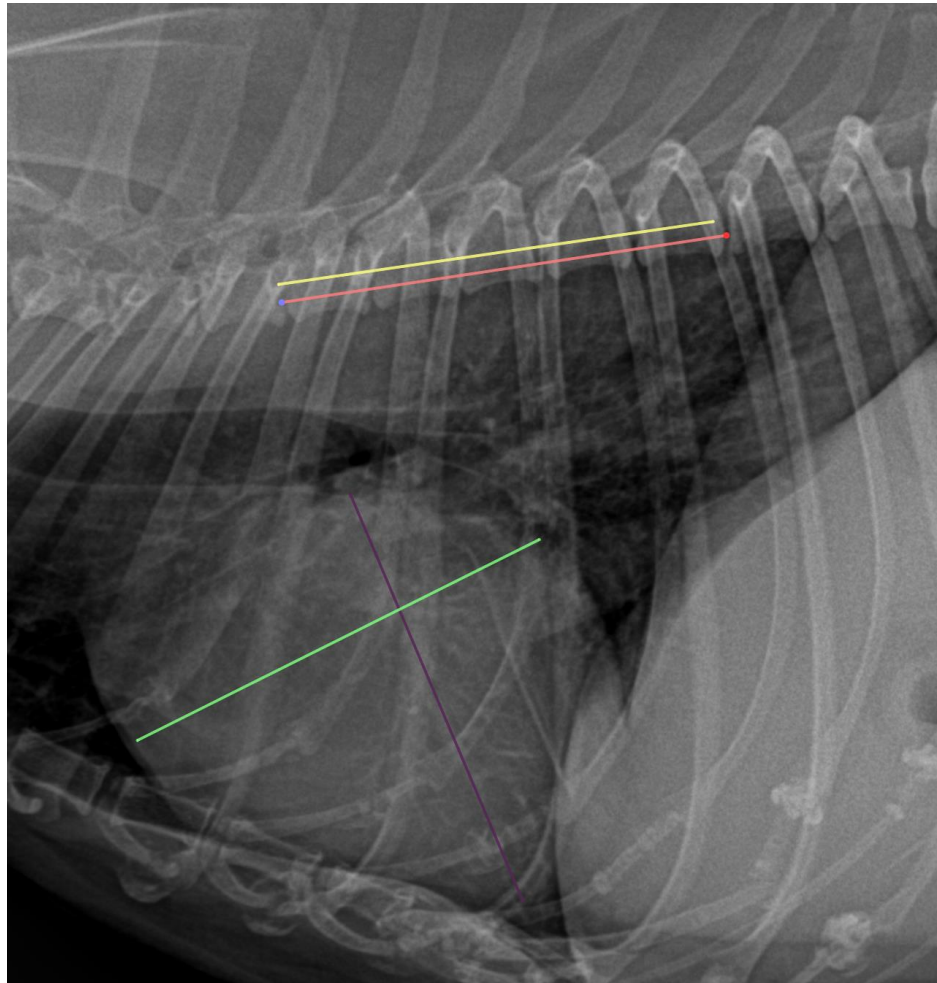
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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