



PATIENT

Paris Lee

PRESENTING CLINICAL SIGNS

Anorexia >1 week, began coughing 6 days ago, coughing up red saliva vs mucus & lethargy started today.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Positive for Lyme (dx & treated in 2019) & Anaplasma (initial dx) infections. BCS 4/9. Heart & Lungs auscult non-remarkable. Elevations: RETIC 323.2 K/ μ L, WBC 20.91 K/ μ L, NEU 18.27 K/ μ L Decreased: PLT 103 K/ μ L, EOS 0.01 K/ μ L, ALKP 21U/L

RADIOGRAPHIC STUDY OF THE THORAX

BREED

Briard

Right/left lateral and ventrodorsal views of the thorax totaling 4 images available for review.

RADIOGRAPHIC FINDINGS

The ribcage is expanded. The lungs are deeply inflated.

SEX

FS

A severe generalized miliary and multinodular interstitial lung pattern is noted throughout the entire lung. The changes are accentuated on the right side which, however, may be due to positional atelectasis should the patient have been positioned in right lateral recumbency prior to the orthogonal views. A lobar sign of the right middle lobe with rounded lobar margins is noted.

AGE

6 Years, 7 Months

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

There is no evidence of pleural effusion and no evidence of concurrent mediastinal lymphadenomegaly.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVCI

RADIOGRAPHIC DIAGNOSIS

- Severe miliary and multinodular interstitial lung pattern.
- Lobar sign of the right middle lobe.

HOSPITAL NAME

POCONO PEAK
VETERINARY
CENTER

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a severe multinodular and miliary interstitial lung pattern with relatively opaque appearance of the multiple small nodules. Differential diagnosis includes granulomatous lung disease such as eosinophilic, granuloma, fungal or mycobacterial pneumonia, and secondary pulmonary neoplasia such as metastatic disease of an undetermined primary tumor, or other such as round cell.

REFERRING VET

Dr. Samantha
Thompson

The lobar sign of the right middle lobe may represent neoplastic infiltrate, hemorrhage, lobar pneumonia, and less likely atelectasis.

Direct sampling of the lung under ultrasonographic guidance could be considered for further definition versus airway endoscopy with airway sampling.

INVOICE

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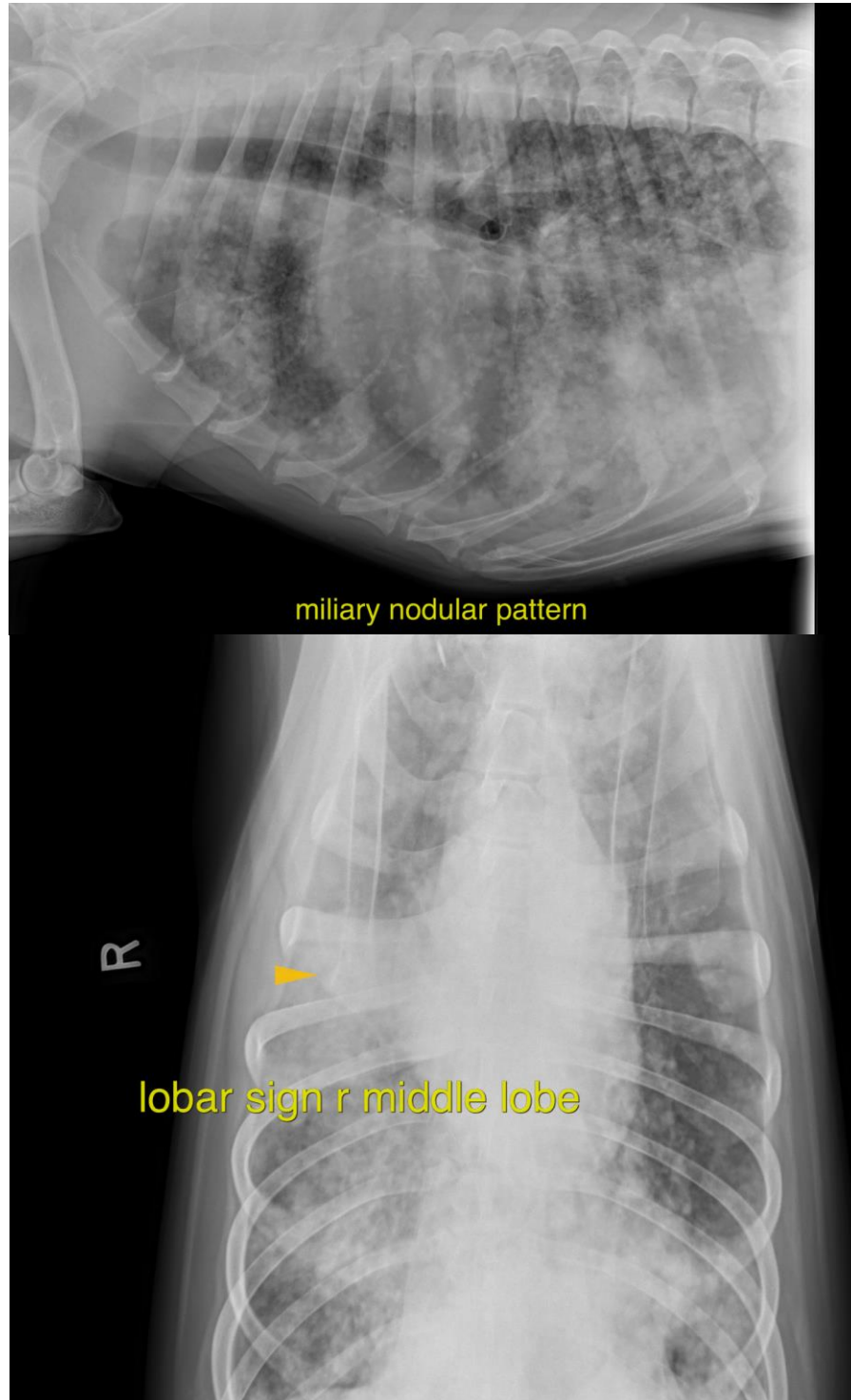
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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