



**PATIENT PRESENTING CLINICAL SIGNS**

Lucy Whitton Visiting area for the summer and some dogs in area have suspected CIRDC. Cough started up yesterday. Eating and drinking normally. Full medical history not available. Currently on:  
**SPECIES** Canine  
 Furosemide 50mg 1/2 PO BID, Carprofen 75mg 1/4 tablet BID, enalapril 5mg 1/2 PO BID, Spironolactone 25mg 1/2 tab PO BID, Vetmedin 5mg 1/2 tab BID, theophylline 100mg 1 PO BID, amlodipine 2.5mg 1/2 tab PO BID  
 Abnormal PE/Chem/CBC/UA Results: Grade 4/6 left sided systolic murmur, slight crackle right side of chest

**BREED RADIOGRAPHIC STUDY OF THE THORAX**

Cavalier King Charles Right/left lateral and dorsoventral views totaling 3 images available for review in jpeg format.

**SEX RADIOGRAPHIC FINDINGS**

FS Mild mid and caudal thoracic spondyloses are present.

**AGE** 11 Years  
 I am unable to measure the vertebral heart score on the jpeg images; however, there is obvious and at least moderate left ventricular enlargement and severe left atrial enlargement seen. The trachea is elevated towards the thoracic spine. Pulmonary vessel dilation is seen mostly in the caudal pulmonary vessels and less so in the cranial pulmonary vessels. Bronchial spitting and a double opacity sign are seen in the orthogonal view with lift of the mainstem bronchus. There is no evidence of cardiogenic pulmonary edema.

**INTERPRETED BY**

Nele Eley, DVM  
 Dr. med. Vet. DipECVDI

The degree of pulmonary inflation is moderate. A moderate bronchial lung pattern with mild peribronchial cuffing is seen accentuating the caudodorsal lung field.

Mild redundancy of the dorsal tracheal ligament is present.

**HOSPITAL NAME** There is moderate gastric aerophagia.

Bayshore Veterinary Hospital

**RADIOGRAPHIC DIAGNOSIS**

- Severe left sided cardiomegaly with left atrial enlargement and mass effect on the left mainstem bronchus.
- No evidence of cardiogenic pulmonary edema.
- Pulmonary venous hypertension.
- Active bronchial lung pattern with caudodorsal accentuation.
- Aerophagia.
- Spondyloses.

**REFERRING VET**

Lara Stephens-Brown

**INVOICE**

46952

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

8-11-21

Based on the radiographic findings, there appears to be potential for two separate entities, one represented by severe left sided cardiomegaly with left atrial enlargement due to chronic mitral valve endocardiosis and regurgitation with mass effect onto the left mainstem bronchus; second, the radiographic evidence of active lower airway disease with caudodorsal accentuation which may well represent infectious bronchitis such as CIRDC or other. There also is dilation of the pulmonary veins with accentuation of the caudal pulmonary veins and severe left atrial



**PATIENT**

Lucy Whitton

enlargement which all suggests that only the correct dose of diuretic medication separates this patient from developing cardiogenic pulmonary edema. Nevertheless, the enlarged left atrium causes a mass effect onto the left mainstem bronchus which may well contribute to the cough as well.

**SPECIES**

Canine

**BREED**

Cavalier King Charles

**SEX**

FS

**AGE**

11 Years

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI



**HOSPITAL NAME**

Bayshore Veterinary  
Hospital

**REFERRING VET**

Lara Stephens-Brown

The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**INVOICE**

46952

**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

**DATE**

8-11-21