

**PATIENT**

MacTavish Muck

PRESENTING CLINICAL SIGNS

Heart murmur recently diagnosed. Somewhat exercise intolerant.
Abnormal PE/Chem/CBC/UA Results: grade 3/6 holosystolic murmur

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX

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

BREED

Australian Shepherd

RADIOGRAPHIC FINDINGS

There is moderate cardiomegaly which, however, appears to be generalized and is not accentuating the left or right side. No significant left atrial enlargement is seen radiographically. The vertebral heart score is 11.3. There is mild dorsoventral elongation of the cardiac silhouette which indicates left ventricular enlargement but there also is increased sternal contact which supports the presence of right ventricular enlargement.

SEX

MN

Both arterial and venous hypertension appears to be present and there is a moderate diffuse increase in interstitial opacity which is evenly distributed throughout the entire lung.

AGE

12 Years

Redundancy of the dorsal tracheal ligament is seen in the cervical trachea.

The liver appears to be prominent, however, is not completely imaged.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Moderate generalized cardiomegaly.
- Pulmonary arterial and venous hypertension.
- Diffuse unstructured interstitial pattern.

HOSPITAL NAME

Pinebrook Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals moderate generalized cardiomegaly. The changes of the lung are not compatible with cardiogenic pulmonary edema. Noncardiogenic pulmonary edema, interstitial pneumonia, diffuse neoplastic infiltrate with round cells, and diffuse interstitial lung disease with fibrosis all are a potential. Based on the radiographic presentation, noncardiogenic pulmonary edema and fibrosis are thought less likely than the other differential diagnoses.

REFERRING VET

Dr. Britt Dubil

Unfortunately, the radiographic changes are rather unspecific and further definition may require a full cardiac echo as well as airway endoscopy with airway sampling should the echo be inconclusive.

INVOICE

47070

DATE

8-20-21



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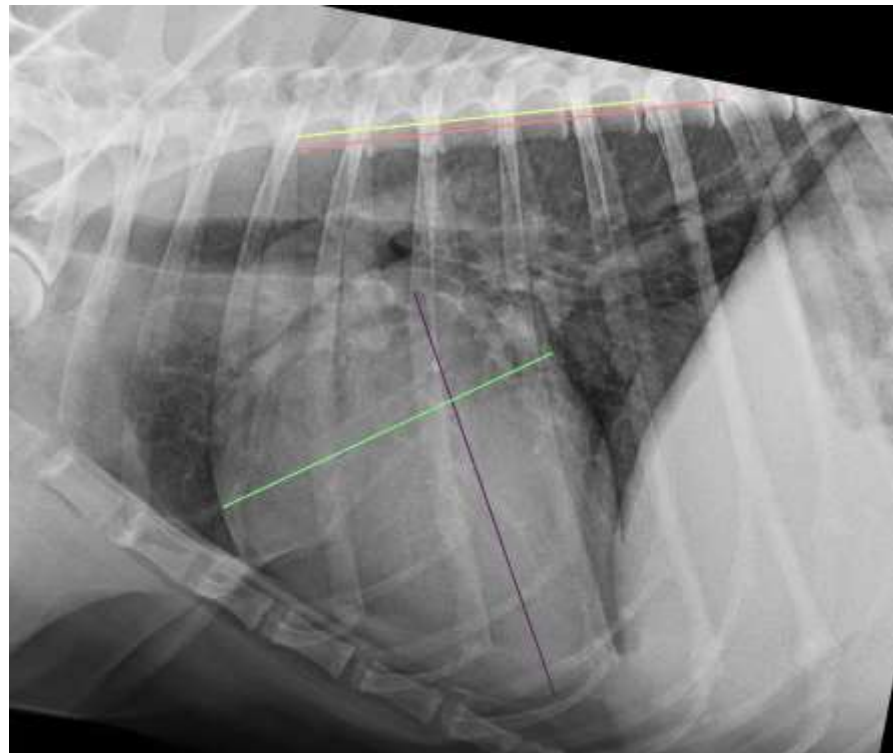
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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