



PATIENT PRESENTING CLINICAL SIGNS

CAMILA MCNUGH

P IS AN 8Y5M OLD F/S SHIH-TZU PRESENTING TODAY FOR LOSS OF APPETITE. O WIFE IS OUT OF TOWN FOR 2 MONTHS LEFT BEGINNING OF JULY P POSSIBLY DEPRESSED. O SWITCHED DIET 4 DAYS AGO P EATING BETTER WITH NEW DIET. STARTED WHEEZING 3 DAYS AGO O GAVE RIB BONE DAY BEFORE WENT TO ER YESTERDAY WAS TOLD PROBABLY NOT FBE NO RADS DONE. O STATES P USUALLY GETS DEPRESSED WHEN WIFE AWAY BUT NEVER THIS BAD. O STATES VOMITS OCC BUT NORMAL FOR P NO MORE THAN USUAL. NORMAL STOOL. NO OTHER PROBLEMS/CONCERNS.

SPECIES

Canine

BREED

Shih Tzu

SEX

SF

AGE

8 Years, 5 Months

Abnormal PE/Chem/CBC/UA Results: Hydration: 5% dehydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no exudate AU; No cough on tracheal palpation, light tracheal cough present after placing pet on the ground. Oral Cavity: moderate to severe dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur/arrhythmia or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: N Musculoskeletal: Normal ambulation, no lameness noted. No pain on palpation of limbs, normal flexion/extension present in all joints of all limbs. BCS 5/9 Neurological: Appropriate CBC - RBC 4.48 L (5.65-8.87), HCT 28.0 L (37.3-61.7), HGB 10.2 L (13.1-20.5), RETIC 6.7 L (10.0-110.0) CHEM - CREA 5.7 H (0.5-1.8), BUN 100 H (7-27), PHOS 11.7 H (2.5-6.8), AMLY 1569 H (500-1500) Electrolytes - Cl 107 L (109.122) UA cysto - SG 1.007, pH 7.0, PRO 500 mg/dL, BLD 25 Ery/uL, WBC <1/hpf, RBC <1/hpf, Suspected non-hyaline cast

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC STUDY OF THE THORAX

Right lateral and ventrodorsal views totaling 2 images available for review.

RADIOGRAPHIC FINDINGS

Mild spondylosis is present at T10/11. The remainder of the osseous structures present within age related normal limits.

HOSPITAL NAME

DPC Veterinary Hospital

The ribcage is expanded. The lungs are deeply inflated and hyperlucent. A mild generalized bronchial lung pattern is noted.

REFERRING VET

Dr. Duke

The "S" shaped course of the trachea is thought to be a function of the head position and mild redundancy of the trachea may be present as well. No evidence of tracheal collapse is noted.

The radiographic presentation of the cardiac silhouette is within normal limits. The pulmonary vasculature and caudal vena cava are thin.

INVOICE

47102

The stomach is mildly distended with fluid and gas and a mild amount of gravel appears to be present within the pyloric antrum.

DATE

8-23-21

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RADIOGRAPHIC DIAGNOSIS

- Normal age related but deeply inflated lung.
- Normal radiographic presentation of the cardiac silhouette.
- No radiographic evidence of tracheal collapse.
- Fluid content and gravel in the stomach.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic presentation of the cardiovascular and bronchopulmonary structures was within age related normal limits.

The presence of fluid and a mild amount of gravel within the stomach be due to prior oral intake of these. Delayed gastric emptying due to functional or mechanical obstructions cannot be ruled out.

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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