



PATIENT

JAX SIMMONS

PRESENTING CLINICAL SIGNS

Chief Complaint: EXCESSIVE PANTING History: P IS A 6Y2M OLD M/N YORKSHIRE TERRIER PRESENTING TODAY FOR EXCESSIVE PANTING GOING ON A WEEK AND A HALF. O STATES BELLY DISTENDED. O STATES P ACTING NORMAL AND PLAYING. E/D NORMAL. O STATES P IS ON MEDICATION TO REDUCE FLUID IN LUNGS PRESCRIBED BY ANOTHER VET RAN OUT OVER A WEEK AGO. O STATES DOES NOT KNOW NAME OF MEDICATION OR THE ANIMAL HOSPITAL THAT PRESCRIBED IT SO CAN'T CALL FOR RECORDS. WENT TO ANOTHER DVM FOR SAME PROBLEM 2 WEEKS AGO, STARTED ON WHAT SOUNDS LIKE LASIX WHICH DID NOT DO ANYTHING, NO IMPROVEMENT. IS NOT PU/PD, NO GI SIGNS, NO COUGHING. HAS GAINED 2 LBS BUT MR FEELS HAS HAPPENED SUDDENLY. NOT PANTING EXCESSIVELY INSIDE ONLY OCCURS AFTER BEING OUTSIDE FOR 10 MINUTES BUT NORMALLY WOULD BE FINE FOR LONGER THAN THAT EVEN WHEN HOT OUTSIDE CV/Respiratory: NO MURMUR, LUNGS CLEAR Abd/GI: DISTENDED, CRANIAL ORGANOMEGALY, TENSE. 2 WEEK HISTORY OF DISTENDED BELLY, PANTING SUDDEN WEIGHT GAIN

SPECIES

Canine

BREED

Yorkie

SEX

MN

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

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

AGE

6

RADIOGRAPHIC FINDINGS

Thorax

The patient is obese.

Moderate collapse of the cervical trachea is seen on the lateral view. There is no evidence of concurrent bronchial collapse. The intrathoracic trachea presents within normal limits.

Mild generalized cardiomegaly with a vertebral heart score of 11.0 is seen with no specific chamber enlargement being radiographically apparent.

The lung presents a mild generalized bronchointerstitial pattern which is considered within age related normal limits. No evidence of pulmonary nodules or masses is seen.

Abdomen

The abdomen appears to be voluminous. The ventral abdominal wall is pendulous.

The kidneys and urinary bladder present within normal limits.

Moderate generalized enlargement of the liver is noted.

The stomach is post-prandial.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Feldt

INVOICE

47120

DATE

8-24-21

**PATIENT**

JAX SIMMONS

RADIOGRAPHIC DIAGNOSIS

- Obesity.
- Pendulous abdomen.
- Hepatomegaly.
- Cervical tracheal collapse.
- Mild generalized and unspecific cardiomegaly without evidence of congestive heart failure.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**BREED**

Yorkie

With the pertinent history and radiographic presentation, metabolic syndrome such as Cushing's should be ruled out by means of further laboratory workup and eventual ultrasound of the adrenal glands. Further definition of the source of the hepatic enlargement could be considered at the same time. General differential diagnosis for the hepatomegaly includes metabolic/endocrine hepatopathy and diffuse infiltrative pathologies such as inflammatory/infectious and neoplastic. Parenchymal sampling could be considered to further support the diagnostic workup.

SEX

MN

The enlargement of the cardiac silhouette is mild and may well be due to bradycardia, diastolic exposure, anemia, or fever would be other potential causes. Correlate with the clinical findings. There appear to be no hemodynamic consequences based on the radiographs at this point and no murmurs auscultated in the clinical examination so that there is no absolute indication for further definition by means of a cardiac echo in this patient at this point.

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The cause of the trachea collapse is presumed to be degenerative bronchomalacia. Consider empirical management in case of pertinent clinical signs.

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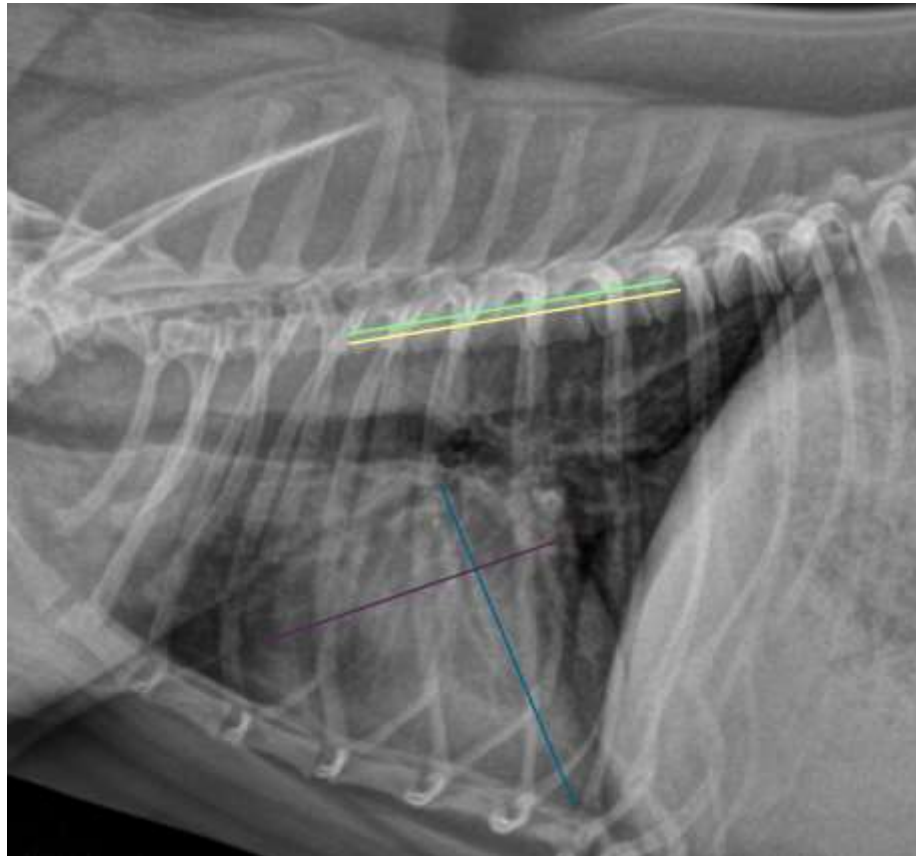
MN

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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.

REFERRING VET

Dr. Feldt

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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