



PATIENT

Bitsy Bergman

SPECIES

Canine

BREED

Shih Tzu

SEX

FS

AGE

13

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Golden Isles Animal
Hospital

REFERRING VET

James Hornbuckle

INVOICE

53724

DATE

8-25-22

PRESENTING CLINICAL SIGNS

Bitsy has been diagnosed with chronic bronchitis, dynamic collapsing trachea and associated resp. dz. She is currently on Theophylline 80mg sid, Prednisone 2.5 mg qod, lasix 6.25 mg sid. She is BAR will run and play readily, sleeps well and has intermittent cough, generally non productive. A wheeze is audible on general exam, most notable on inspiration, and modest rales are noted throughout respiration. Current concern is that she is having "dyspnic" episodes periodically Xrays were ordered to compare to prev. rads looking ro new findings

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views of the thorax totaling 5 images available for review.

RADIOGRAPHIC FINDINGS

The lungs are poorly inflated despite expansion of the ribcage and caudal position of the tip of the caudal lung lobes which indicates obstruction of the upper airways.

Moderate to severe caudal cervical and thoracic tracheal collapse are seen. The cervical trachea is collapse on the more inspiratory views and the thoracic trachea is collapsed on the more expiratory views. Concurrent bronchial collapse is seen on the expiratory views.

The cardiac silhouette presents within normal limits. The vertebral heart score is 9.

A mild generalized bronchial lung pattern is seen with mild peribronchial cuffing.

Esophageal and gastric aerophagia are noted.

There is mild generalized hepatomegaly.

The patient is obese.

RADIOGRAPHIC DIAGNOSIS

- Moderate to severe dynamic tracheal collapse with significant airway obstruction and reduced pulmonary expansion.
- Concurrent bronchial collapse.
- Mild generalized bronchial lung pattern.
- Aerophagia likely secondary to respiratory distress.
- Mild hepatomegaly.
- Obesity.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings confirm the presence of severe dynamic tracheal disease. Concurrent dynamic bronchial collapse is noted. Degenerative bronchomalacia is thought the most likely underlying cause of the dynamic tracheobronchial disease.

Note the presence of a bronchial lung pattern which indicates coexisting presence of eosinophilic bronchopneumopathy or infectious bronchitis. Further definition by means of airway endoscopy with airway sampling could be considered.



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Based on the radiographic impressions, the patient does not appear to be an ideal candidate for tracheal stenting based on the presence of carinal / bronchial involvement.

Differential diagnosis for the mild hepatomegaly includes vacuolar, metabolic, endocrine, inflammatory/infectious, and infiltrative hepatopathy. Correlation with the laboratory values is recommended in order to determine the need for further definition by means of ultrasound and/or eventual parenchymal sampling.

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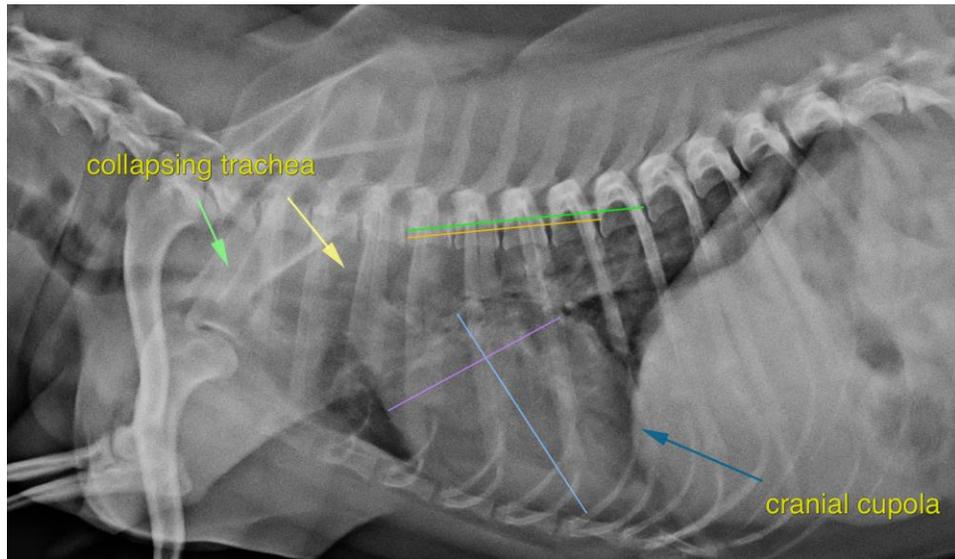
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

REFERRING VET

James Hornbuckle

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

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