



PATIENT PRESENTING CLINICAL SIGNS

Cici Samec Presented to TVEH on July 23rd for shallow breathing and coughing. Harsh lung sounds found on GPE, otherwise unremarkable. Radiographs taken show cardiomegaly. History of grain-free diet. Started furosemide and Pimobendan. Ecocardiogram shows mild mitral and trace tricuspid valve regurgitation as well as evidence of pulmonary hypertension. No evidence of dilated cardiomyopathy.

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: Blood work done at TVEH: PCV 43 (35-57) TS 9 (6.0-7.5) K 4.44 (3.8-5.4) Na 146.5 (144-153) Cl 107 (108-119) Ca²⁺ 1.35 (1.29-1.48) Glu 5.2 (3.5-6.6) Lactate 3 (0.3-2.3) pH 7.361 (7.35-7.46) PvCO₂ slope (36-49) ABE --- (-5 to 3) HCO₃ --- (19-25) Urea (N) 3.7 (3.4-9.1) Crea (I) 48 (20-150) Interpretation: Elevated lactate; no azotemia

BREED

Dachshund **RADIOGRAPHIC STUDY OF THE THORAX**

Right and left lateral as well as ventrodorsal views of the thorax totaling 3 images available for review.

SEX

Spayed Female

RADIOGRAPHIC FINDINGS

General course and width of the trachea are within normal limits. Mild redundancy of the dorsal tracheal ligament is seen in the cervical trachea. The ventral contour of the cervical trachea is mildly wavy which is considered within age related normal limits.

AGE

10 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

There is moderate right and left sided cardiomegaly with left atrial tenting and loss of the caudal cardiac waist as well as broad sternal contact due to rounding of the right ventricle. The vertebral heart score is 10.8. The trachea is elevated. No significant splitting of the mainstem bronchi is seen in the orthogonal view. The right lobar pulmonary artery is broadened with abrupt caudal tapering. No evidence of main pulmonary arterial enlargement is seen in the orthogonal view.

The degree of pulmonary inflation is fair, yet the lung field appears to be hyperlucent with poor overall vascularity. No significant increase in interstitial or bronchial opacity is seen.

HOSPITAL NAME

Balmy Beach Pet Hospital

RADIOGRAPHIC DIAGNOSIS

- Moderate biventricular cardiomegaly with left atrial enlargement and no evidence of right or left sided congestive heart failure.
- Broadening and abrupt tapering of one lobar pulmonary artery.
- Poor overall pulmonary perfusion of the lung.
- No evidence of structural pulmonary pathology.

REFERRING VET

Dr. Singh

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

The radiographic study of the thorax reveals moderate cardiomegaly. No evidence of congestive heart failure is seen; however, both the left and right heart appear to be moderately enlarged.

46899

No underlying structural changes of the lung are detectable radiographically. However, the radiographic presentation of the right caudal lobar pulmonary artery suggests potential for pulmonic embolism.

DATE

8-7-21

Consider screening for coagulopathy and systemic hypertension, and correlate with the results of the cardiac echo.



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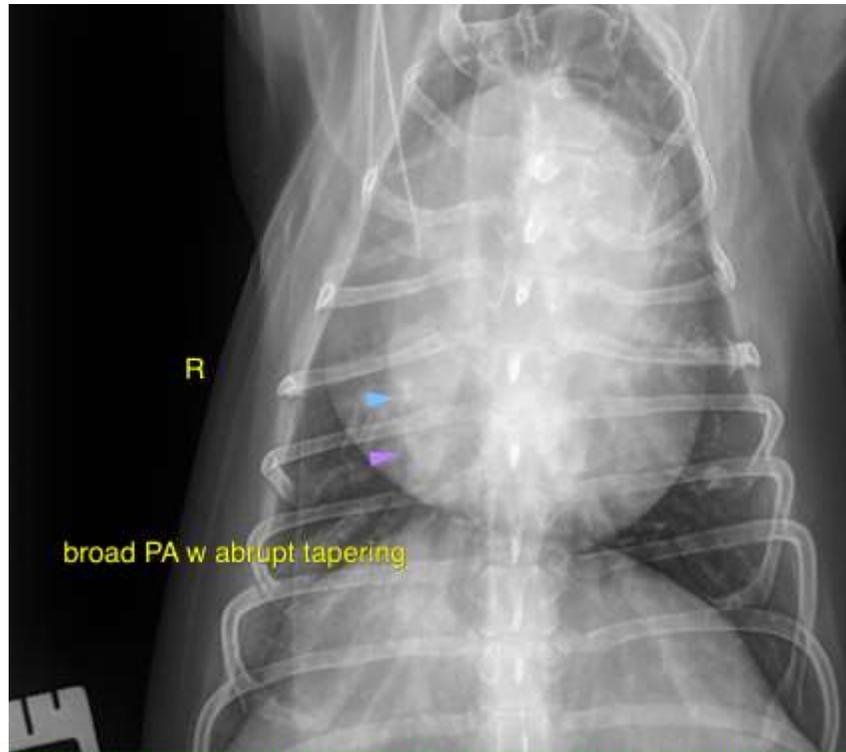
Dr. Singh

INVOICE

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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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