



PATIENT PRESENTING CLINICAL SIGNS

Montana Ritter Reason for Visit: panting History: Panting more frequent than normal for the last couple months and does seem to be more frequent. Owner notices panting at night when things are otherwise calm and patient is laying in bed with owner. Panting is rapid and quiet, no stertor or stridor heard. No coughing. Has occurred almost every night for the past two months. No exercise intolerance observed, normal energy/activity level, still playing and chasing cats as usual. No change in appetite. Does not get nervous with rainstorms. No V/D/S.

SPECIES Canine

BREED Retriever Mix

SEX SF

Abnormal PE/Chem/CBC/UA Results: Hydration: Adequate Mentation: BAR EENT: OU clear. AU clear, no debris. No cough on tracheal palpation. Oral cavity: Moderate tartar, multiple chipped teeth (uncomplicated) Lymph Nodes: Submandibular, prescapular and popliteal lymph nodes normal size, shape and consistency Skin: Healthy hair coat. No ectoparasites seen, skin clean dry and intact. Previously-noted SQ masses unchanged in size/texture. CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. Abd/GI: Soft, non-painful, no fluid wave, no palpable masses or organomegaly. Uro/Perineum: No lesions or abnormalities. Musculoskeletal: BCS = 7/9. Ambulatory x 4, normal gait, normal palpation all 4 limbs. Neurological: Alert and appropriate. No deficits noted. Mild pain on palpation of thoracolumbar junction. Diagnostic Testing: CBC/chem/lytes--all WNL UA via cysto--hyposthenuria USG=1.000 with quiet sediment and pH=7.0

AGE RADIOGRAPHIC STUDY OF THE THORAX

10 Years, 7 Months Right/left lateral and ventrodorsal views of the thorax totaling 3 images available for review.

INTERPRETED BY RADIOGRAPHIC FINDINGS

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The patient is obese.

The degree of pulmonary inflation is moderate. A moderate generalized bronchial lung pattern is seen and evenly distributed throughout the lung. Early peripheral cylindrical bronchiectasis is noted.

HOSPITAL NAME

DPC Veterinary Hospital

Course and width of the trachea are considered within normal limits.

There is no evidence of cardiovascular pathology. The vertebral heart score is 9.

REFERRING VET

Dr. Ward No evidence of mediastinal widening is noted.

RADIOGRAPHIC DIAGNOSIS

- Moderate generalized bronchial lung pattern.

INVOICE

54253

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

9-23-22

The radiographic study reveals a moderate chronic generalized bronchial lung pattern which suggests presence of chronic lower airway disease such as eosinophilic / allergic bronchopneumopathy versus infectious bronchitis such as viral, bacterial, or parasitic. Further definition by means of lung worm testing and airway endoscopy with airway sampling could be considered. A clinical trial of treatment for bronchitis could be considered an alternative.



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BREED

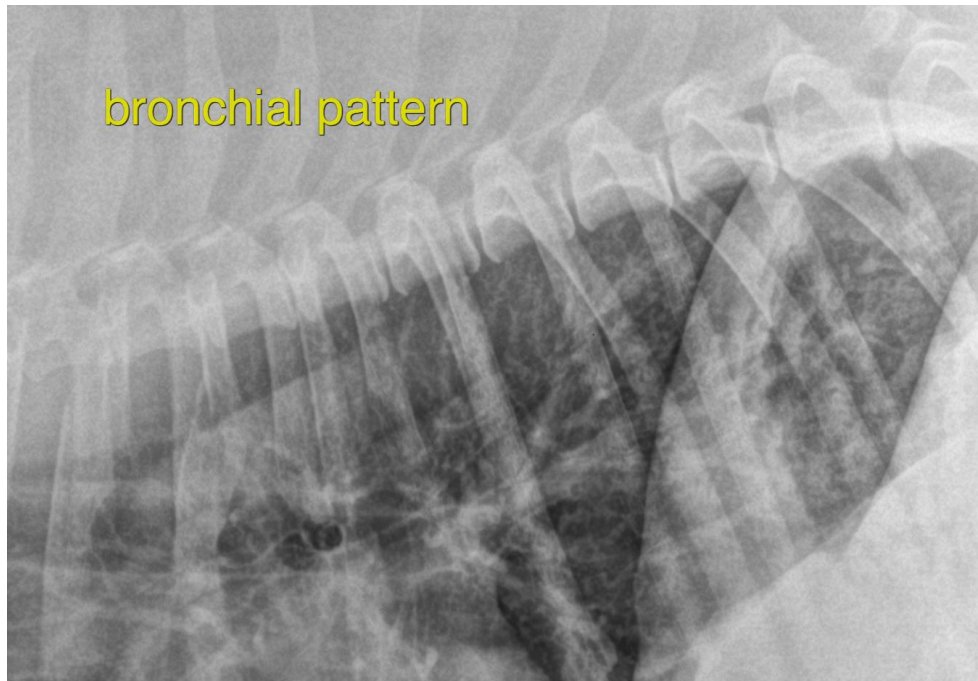
Retriever Mix

SEX

SF

AGE

10 Years, 7 Months



INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

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.

HOSPITAL NAME

DPC Veterinary
Hospital

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REFERRING VET

Dr. Ward

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