



PATIENT

Sparky Vu

SPECIES

Canine

BREED

Pomeranian

SEX

Male

AGE

8 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Ahwatukee Commons
Veterinary Hospital

REFERRING VET

Dr. Rebecca R.
Housley

INVOICE

54289

DATE

9-26-22

PRESENTING CLINICAL SIGNS

Coughing since about Thursday. no production. Pt having less activity level according to O. PT just had dental done Monday- possible irritation from ET tube? E/D normal. No V/D Coughing: r/o secondary to endotracheal tube intubation on Monday, heart disease, tracheal collapse, URI (kennel cough), open Thoracic radiographs: VHS measuring 10-10.5. Prominent bronchial pattern noted in all lung lobes. Intrathorax tracheal collapse suspected. Osteomas - age related suspected.

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views of the thorax totaling 4 images available for review.

RADIOGRAPHIC FINDINGS

The vertebral heart score is 10.1.

The degree of pulmonary inflation is moderate. A mild generalized bronchial lung pattern is noted. Note the presence of occasional age related incidental pulmonary osteomas.

Mild collapse of the intrathoracic trachea is seen on both the left and right lateral views.

No evidence of mediastinal widening is seen.

Note the presence of mild generalized hepatomegaly.

The stomach is postprandial.

RADIOGRAPHIC DIAGNOSIS

- Suspect dynamic tracheal disease.
- No radiographic evidence of cardiovascular pathology.
- Mild bronchial lung pattern.
- Hepatomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings suggest potential for dynamic tracheal disease with mild inspiratory collapse of the thoracic trachea. No concurrent bronchial collapse is noted.

The radiographic findings are negative for significant cardiovascular changes.

The mild bronchial lung pattern is likely to be within age related normal limits. However, eosinophilic bronchopneumopathy and infectious bronchitis including viral, bacterial, and parasitic cannot be ruled out entirely as differential diagnoses.

Differential diagnosis for the hepatomegaly includes vacuolar, metabolic, endocrine, and less likely inflammatory/infectious and diffuse infiltrative disease. Correlate with the laboratory values.

Upper and lower airway endoscopy with airway sampling could be considered for further



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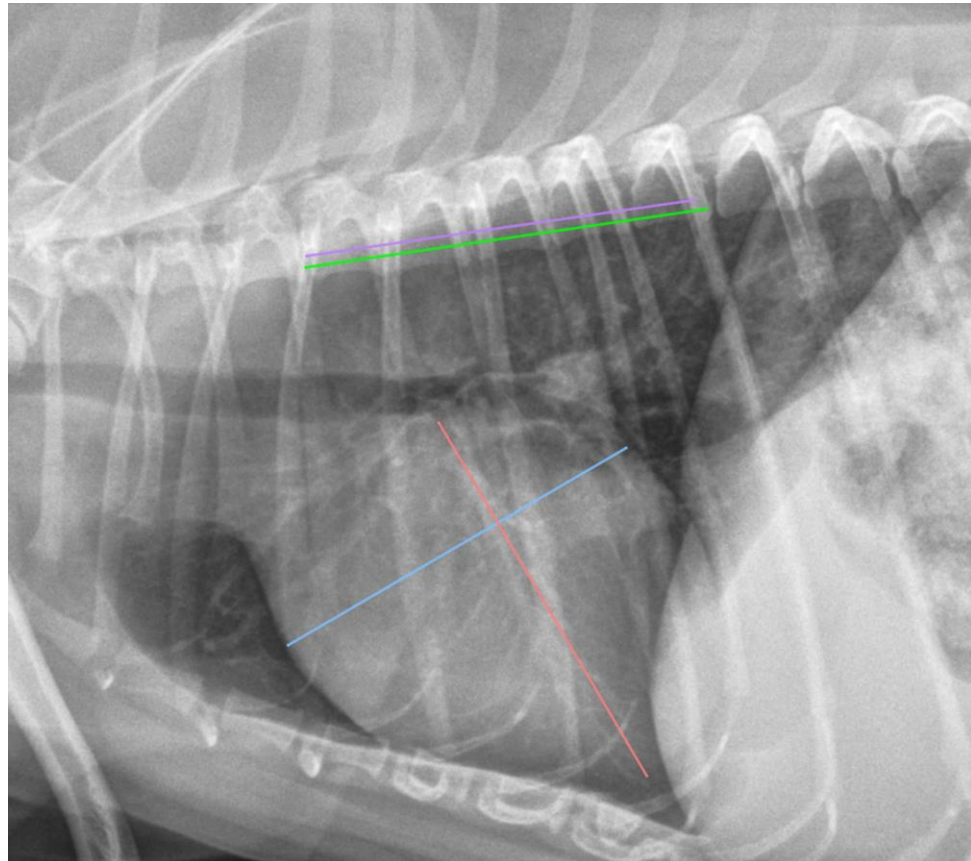
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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