



PATIENT

Lacy Jones

PRESENTING CLINICAL SIGNS

Prior CIRD Dx and Tx with Doxy; No Cardiac M/A
Abnormal PE/Chem/CBC/UA Results: BCS: 7/9

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX

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

BREED

Puggle

Thoracic read requested.

RADIOGRAPHIC FINDINGS

A moderate amount of pleural effusion is seen within both pleural cavities and symmetrically distributed.

SEX

FS

No evidence of significant cardiomegaly is seen.

AGE

13

The lung lobe margins are retracted from the thoracic wall and rounded. A diffuse increase in pulmonary opacity is seen with no evidence of a significant mass effect or pulmonary nodules. All lung lobes appear to present residual aeration. There is no evidence of deviation or twisting of the bifurcation.

A mediastinal mass is not overtly seen.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

There is gastric aerophagia noted.

RADIOGRAPHIC DIAGNOSIS

- Bilaterally symmetric moderate pleural effusion with partial pulmonary collapse.

HOSPITAL NAME

Summit Dog & Cat
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals moderate bilaterally symmetric pleural effusion. Structural pulmonary changes, lung lobe torsion, cardiomegaly, or a mediastinal mass are not directly seen as potential underlying causes of the pleural effusion. However, smaller mass effects within the lung or mediastinum cannot be ruled out entirely. Aspiration and analysis of the pleural fluid as well as a (fast) cardiac echo could be considered for further definition as a primary step depending on the results, computed tomography could be a reasonable test for further definition.

REFERRING VET

Vogler

INVOICE

53935

Note the presence of abdominal changes such as hepatomegaly and urinary bladder calculi.

DATE

9-6-22



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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.

SPECIES

Canine

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