



**PATIENT PRESENTING CLINICAL SIGNS**

Fancy Feebe Knudsen Advanced dental changes - suspect trigger for recent coughing -- bacterial upper airway issues. Non-productive cough progressing over the last 2 weeks only with activity -- no other dogs in the home with clinical symptoms

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Nothing completed at this time

Canine **RADIOGRAPH OF THE THORAX**

Right/left lateral and ventrodorsal views available for review.

**BREED RADIOGRAPHIC FINDINGS**

Min Poodle The surrounding bony structures are within normal limits.

The extra-thoracic soft tissues are without abnormalities.

**SEX** The cardiac silhouette is normal without evidence of chamber enlargement. The vertebral heart score equals 9.7.  
FS

**AGE** The pulmonary vessels are normal in size and taper appropriately in the periphery. The lung density appears normal throughout. There is no evidence of nodular or focal lesions recognized.

13 Years, 11 Months

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

The trachea shows mild deviation at the level of the thoracic inlet but is unremarkable in diameter and thoracic course. Luminal outline of the trachea is smooth with mild mineralization of the tracheal rings. Caudal to the carina, a soft tissue dense, rounded area of 1.4 cm is recognized. Caudal to that finding, subtle bronchial thickening is noted. The carina and the left main stem bronchi appear normal. The left lateral view presents a collapse of the right main stem bronchi in a moderate expiratory phase. The peripheral bronchi are normal in diameter and course.

**HOSPITAL NAME**

The mediastinum presents expected soft tissue density, there is no evidence of tracheobronchial, cranial mediastinal or sternal lymphadenopathy. No mediastinal shift is seen.

Gentle Doctor Animal  
Hospital

The esophagus is not visible and considered to be normal.

The diaphragm is unremarkable, there are no signs of pleural effusion.

**REFERRING VET**

Dr. Bashara

**RADIOGRAPHIC DIAGNOSIS**

**INVOICE**

57475

- Suspected collapse of the right main stem bronchi
- Questionable pulmonary lesion caudal to the carina
- Subtle bronchial infiltrates caudal the suspected lesion
- Mild age-related tracheal changes and deviation of the trachea at the level of the thoracic inlet due to head/neck positioning

**DATE**

3-28-23



**PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Fancy Feebe Knudsen

The suspected collapse of the right main stem bronchi may be due to the respiratory phase. A compressing lesion is not identified. Tracheal collapse is not obvious but cannot be fully excluded.

**SPECIES**

Canine

The questionable lesion caudal to the carina confluent with the left atrium which appears inconspicuous in the d/v view. Cardiomegaly/enlargement of the left atrium/congestive issues are not suspected. Possible differentials include but are not limited to a pulmonary nodule and an inflammatory process as seen with chronic/granulomatous disease (consider follow up radiographs in 4 weeks). The subtle bronchial thickening caudal to that area likely represents mild bronchitis.

**BREED**

Min Poodle

If treatment of an inflammatory/infectious disease does not improve the clinical symptoms, therapy of a tracheal/bronchial collapse may be an option.

**SEX**

FS

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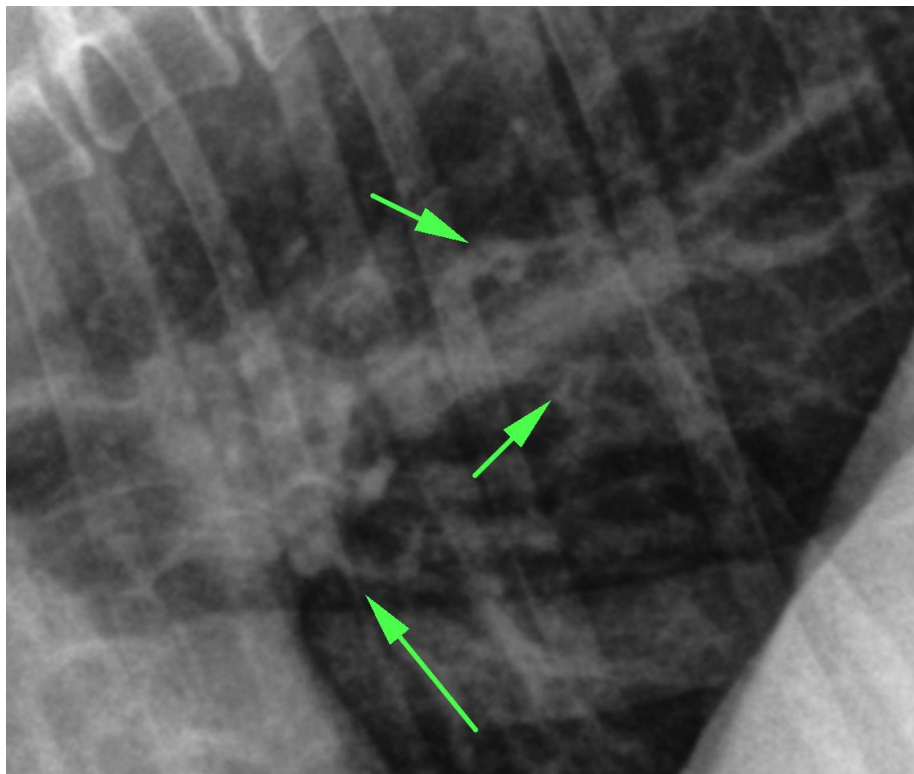
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**HOSPITAL NAME**

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**REFERRING VET**

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**SPECIES**

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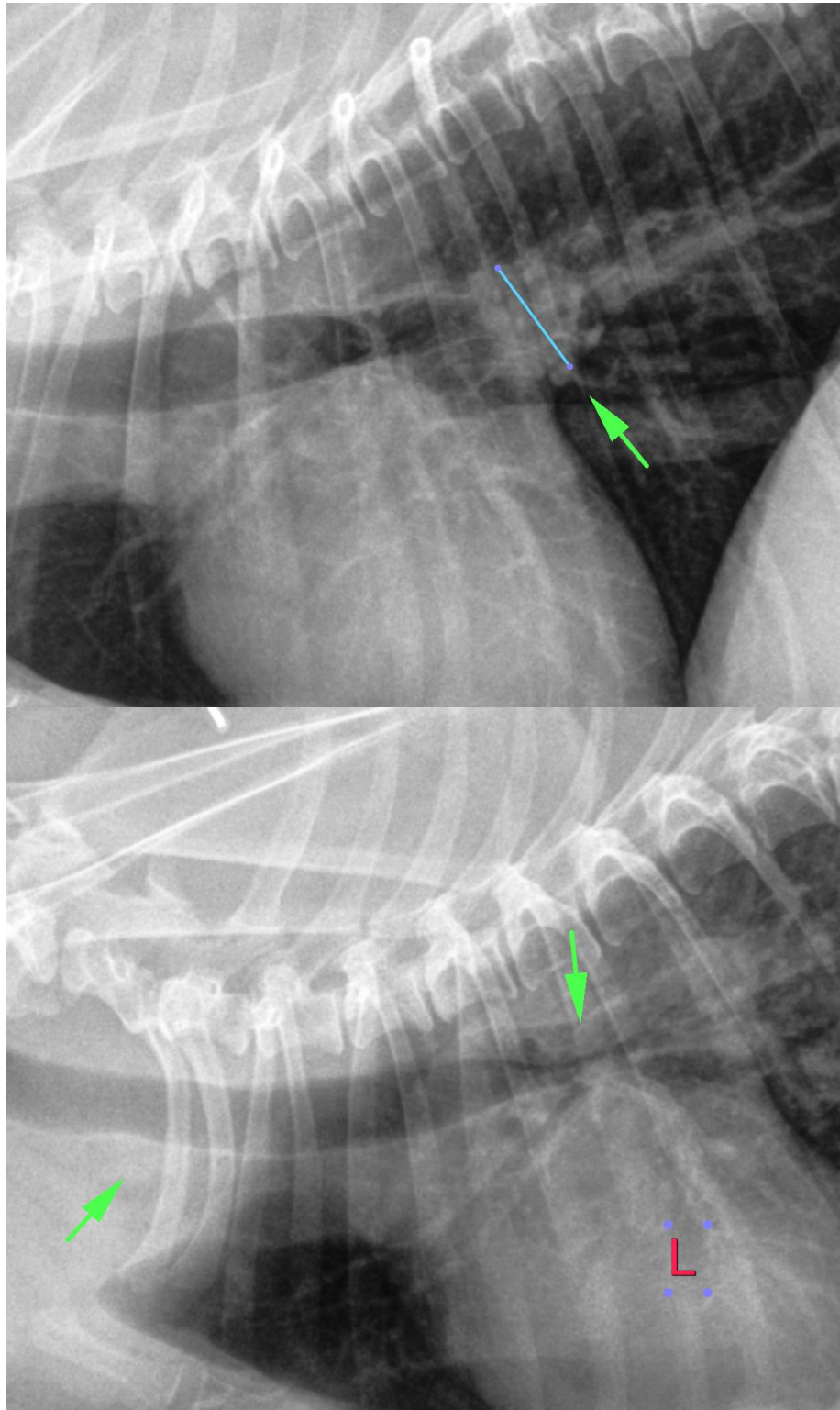
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**PATIENT**

Fancy Feebe Knudsen

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.

**SPECIES**

Canine

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.

**BREED**

Min Poodle

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