



PATIENT PRESENTING CLINICAL SIGNS

Wild Bill Branford Lamb History: Has been coughing after activity and has a hard time calming the cough down. Has been going on for about 2 months.

SPECIES

Abnormal PE/Chem/CBC/UA Results: Slight increase in effort at beginning of inspiration. No obvious crackles or wheeze heard. Heart rate and rhythm normal but can feel heart beating very strongly on both sides of thorax. No murmur heard. No gallop heard. Deep almost honking type cough in clinic. Cannot elicit with tracheal palpation nor with chest compression. HR 140, RR panting Heartworm test negative Chem/CBC/UA pending

BREED

RADIOGRAPHIC STUDY OF THE THORAX

Labrador Retriever The surrounding bony structures are within normal limits. The extra-thoracic soft tissues are homogenous without abnormalities.

SEX

Male

The cardiac silhouette appears rounded and subjectively enlarged. The vertebral heart score equals 11.1.

AGE

4 Years

The pulmonary vessels are poorly defined caudal and right to the hilus best seen in the vd views superimposing with an increase of the interstitial lung density. Vessel size and tapering are considered as normal.

The lung density presents a marked interstitial pattern predominantly located in the caudal and dorsal lung region. The lung periphery reveals some bronchial infiltrates. There is no evidence of focal/nodular lesions.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

The trachea shows a mild alternating diameter cranial to the thoracic inlet and appears mildly dorsally elevated running parallel to the thoracic spine. Luminal outline of the trachea is smooth.

HOSPITAL NAME

Grove VC

The mediastinum presents expected soft tissue density, there is no evidence of tracheobronchial, cranial mediastinal or sternal lymphadenopathy. No mediastinal shift is seen. The esophagus is not visible and considered to be normal. The diaphragm is unremarkable, no signs of pleural effusion.

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

Dr. Luna

- Cardiomegaly with dorsal elevation of the trachea
- (Broncho-) interstitial lung pattern with mild bronchial infiltrates
- Mildly alternating diameter of the trachea

INVOICE

12662

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

8/21/21



PATIENT

Wild Bill Branford
Lamb

Radiographic findings do match with the clinical presentation. The increase of interstitial lung density and bronchial wall thickening speak for an inflammatory process such as bronchitis/mild bronchopneumonia as seen with infectious disease or allergic issues.

SPECIES

Canine

There is no nodular pattern noticed, signs for congestive edema or other findings like lymphadenopathy are missing, therefore I assume an inflammatory pattern to be most likely. Further diagnostic steps could be echocardiography to exclude initial heart disease (left ventricular enlargement, DCM?) and endoscopic BAL and swap to rule out other circumstances resistant to treatment.

BREED

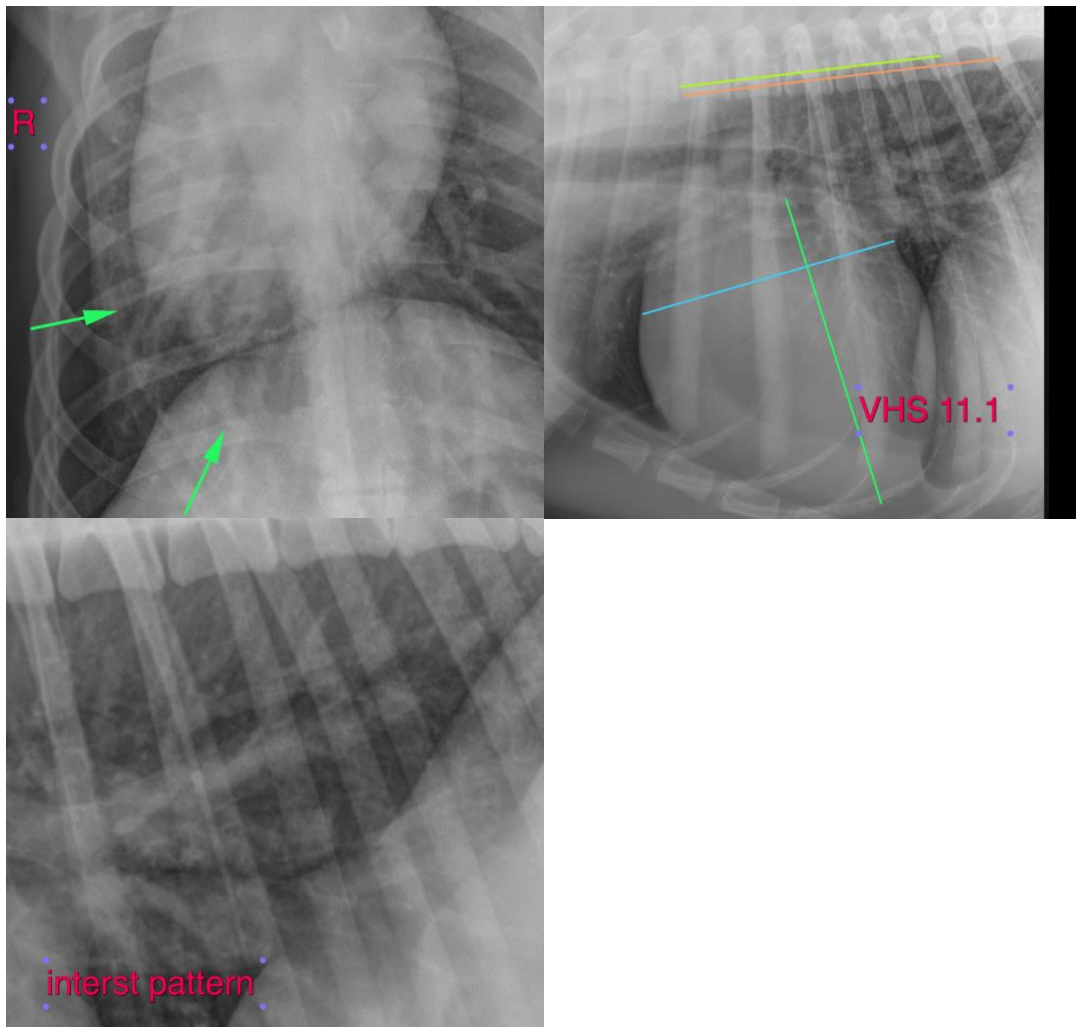
Labrador Retriever

SEX

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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.

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PATIENT

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.

Wild Bill Branford
Lamb

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com

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