



PATIENT

Wrangler Hale

SPECIES

Canine

BREED

Australian Cattle Dog

SEX

Male Neutered

AGE

9 Years, 6 Months

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Harvest Hills
Veterinary Hospital

REFERRING VET

Jonathan Moss

INVOICE

56304

DATE

1-21-23

PRESENTING CLINICAL SIGNS

Pt is a current technician's dog that started having louder breathing sometime in the last 1-2 years. Pt would mildly improve on prednisone but never totally back to normal. Pt has stertorous breathing for at least since roughly March of 22, but got much worse in Oct. Now the past few months pt has started wheezing more. Currently on pred and doxy, with no noticeable improvement from O. Just after rads today were taken pt got albuterol nebulizer tx and did seem to improve slightly

Abnormal PE/Chem/CBC/UA Results: Today was on reactive and cried out on palpation of laryngeal area but elicited no cough. BW in Oct 22 were within expectation. UA showed 4+ protein, 1+ bili and 2+ epithelial cell. UPC ratio was 3. total t4 was 0.5, but follow up thyroid panel showed t4-11, t3-1.7, free t4-7. cTSH-0.25, thyroglobulin-3, t4 antibody-10, t3 antibody-3. Calcium-10. acetylcholine receptor ab-0.01. Barium swallow showed no megaesophagus.

RADIOGRAPHIC STUDY OF THE NECK & THORAX

A complete set of radiographs of the neck and thorax is provided for review.

RADIOGRAPHIC FINDINGS

The pharynx is aerated. The larynx presents with the expected anatomy.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and generalized mild increased radiopacity; the lung field is extending caudally up to the vertebral endplate of T10 (expiratory film); the intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

RADIOGRAPHIC DIAGNOSIS

- Normal neck
- Normal thorax

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax presents without abnormalities, explaining the described clinical signs. Given the clinical signs, a potential might be laryngeal paralysis. Evaluating the motion of the laryngeal cartilages under sedation can be used for further definition.



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TECHNICAL COMMENTS

Human fingers are seen in the primary beam, please consider radiation safety guidelines!

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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.

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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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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