



PATIENT

Bitsy Kennedy

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

10 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Duke

INVOICE

47828

DATE

10-18-21

PRESENTING CLINICAL SIGNS

P IS A 10YR OLD F/S CHIHUAHUA PRESENTING TODAY FOR SHAKING IN THE MORNING AND COUGH/HACK. P STATES P WAS DOING OK UNTIL 4 DAYS AGO STARTED COUGH/HACK MORE FREQUENT. O STATES LAST 2 DAYS GETTING WORSE. O FEELS P MORE ANXIOUS ON MEDICATIONS. P SHAKING EXCESSIVELY O FEELS NEEDS ANXIETY MEDS WHEN P GETS ANXIOUS COUGHS MORE. O CALLED VCA WAS TOLD TO GIVE VETRISCIENCE COQ10.

RADIOGRAPHIC STUDY OF THE THORAX

Radiographs of the thorax in three imaging planes are provided for review.

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

Stationary enlargement of the heart, accentuating the left ventricle and atrium is visible, causing dorsal elevation of the left principal bronchus and the trachea paralleling the thoracic spine. The pulmonary vasculature is within normal limits.

The caudal lung lobes present a persistent mid to moderate unstructured interstitial pattern.

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

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

RADIOGRAPHIC DIAGNOSIS

- Left sided cardiomegaly
- Unstructured interstitial pattern caudal lung lobes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are nearly stationary in comparison to the previous radiographic study but regression of the unstructured interstitial pattern that is less pronounced in comparison to the previous radiographic study. The persistent interstitial pattern with the cardiac changes is concerning for cardiogenic pulmonary edema – check for tachycardia ± tachypnea in rest. Pneumonitis, pulmonary fibrosis or non-cardiogenic edema (e.g. pancreatitis, glomerulonephritis) are potentials but considered less likely.



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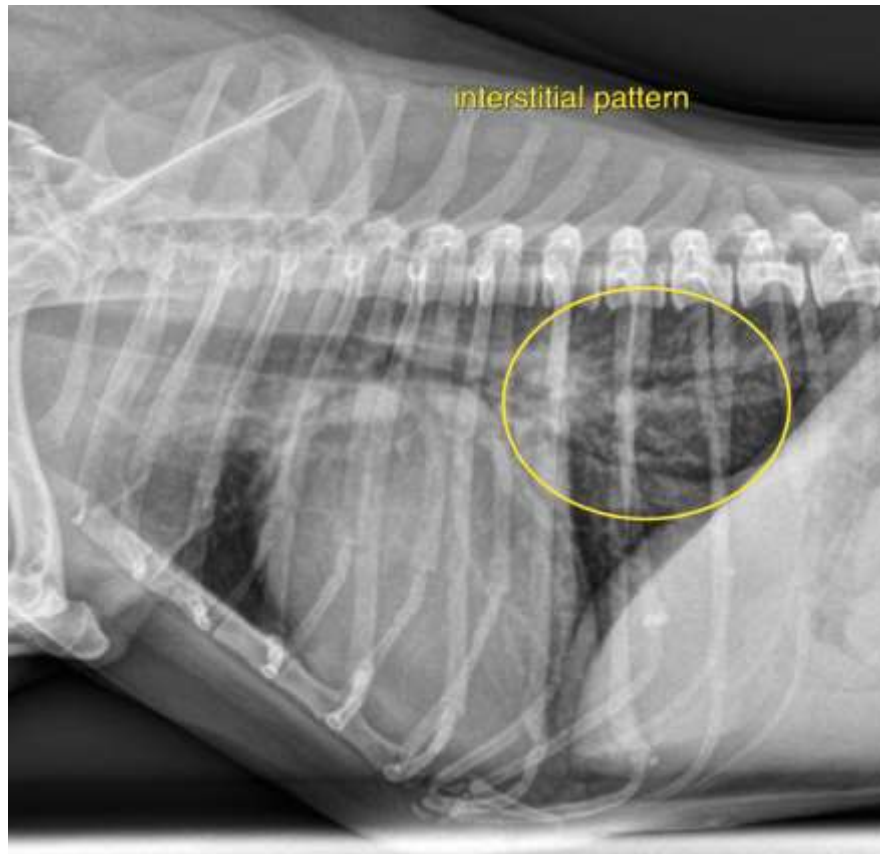
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
sebast.schaub@gmail.com