



PATIENT

Bronco Diggs

PRESENTING CLINICAL SIGNS

Bronco has been having difficulty swallowing, raspy bark and being lethargic. His bark sounds hoarse, but no coughing or sneezing. Swallowing: he has no foaming at the mouth and appears like a cat retching. They didn't see any trauma.

SPECIES

Dog

Abnormal PE/Chem/CBC/UA Results: SOME DISCOMFORT TO PALPATION OF LARYNX SLIGHT COUGH ELICITED ON TRACHEAL PALPATION

BREED

Boston Terrier Mix

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.

SEX

MN

In the left lateral projection of the thorax, segmental ventral deviation of the most cranial segment of the trachea is appreciated - no overt tracheal deviation is noted in the right lateral and ventrodorsal projection of the thorax.

AGE

8 Years, 1 Month

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

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

HOSPITAL NAME

Elizabeth Animal Hospital

The lung parenchyma presents the expected architecture and opacity; 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

REFERRING VET

Kim Allyn, DVM

- Ventral deviation most cranial tracheal segment
- Normal thorax

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

55194

The segmental ventral deviation of the most cranial tracheal segment can be a sequela to positioning of the skull. However, check clinically for evidence of mass dorsal to the trachea.

The thorax presents without abnormalities.

DATE

11-15-22



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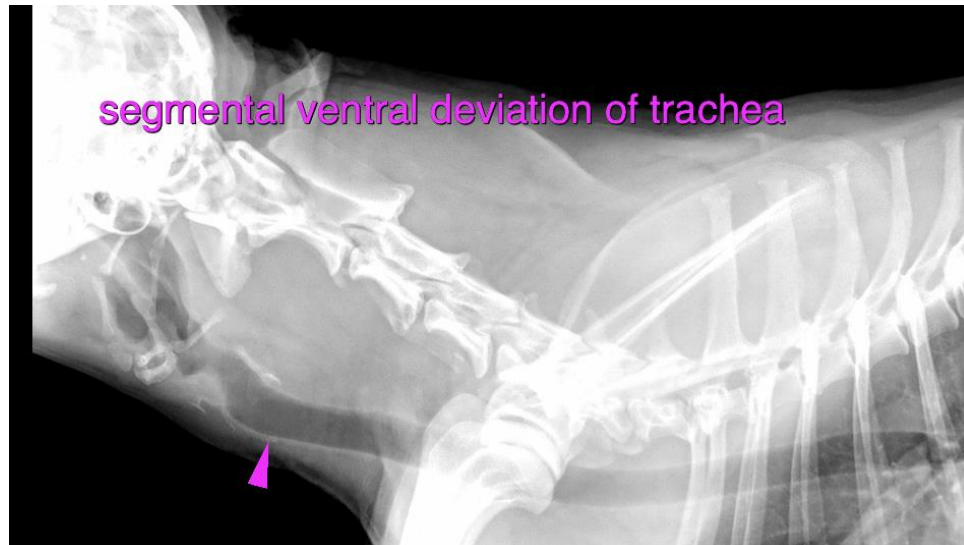
Kim Allyn, DVM

INVOICE

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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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com