



PATIENT

Theo Stout

SPECIES

Canine

BREED

Chihuahua

SEX

Male Neutered

AGE

9.5Y

WEIGHT

13.7lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Dr. Abina Glennon

HOSPITAL NAME

New Bridge Veterinary
Practice

REFERRING VET

Dr. Abina Glennon

INVOICE

72988

DATE

12-15-25

PRESENTING CLINICAL SIGNS

Constant coughing Is currently on Enalapril and Spironolactone

RADIOGRAPHIC STUDY OF THE THORAX

A right lateral view of the thorax is provided for review.

RADIOGRAPHIC FINDINGS

Moderate motion blurring is present.

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

The caudal contour of the cardiac silhouette is steep, and the caudal cardiac waist is lost. A wedge shaped soft tissue opacity is seen level with the left atrium and splaying of the main-stem bronchi is appreciated. The pulmonary vasculature is within normal limits.

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.

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

- Left sided cardiomegaly without signs of decompensation

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left sided cardiomegaly is likely a sequela to underlying mitral valve disease with secondary mitral valve insufficiency and secondary volume overload – there are no signs for decompensation. A cardiac echo can be used for further assessment of cardiac chamber size and function. Mechanical interaction of the enlarged left atrium with the principal bronchi can trigger cough as well as latent tracheitis/bronchitis despite overt radiographic changes of the lower airways.

A second view of the thorax can help to rule out gross pathology of the lower airways entirely.



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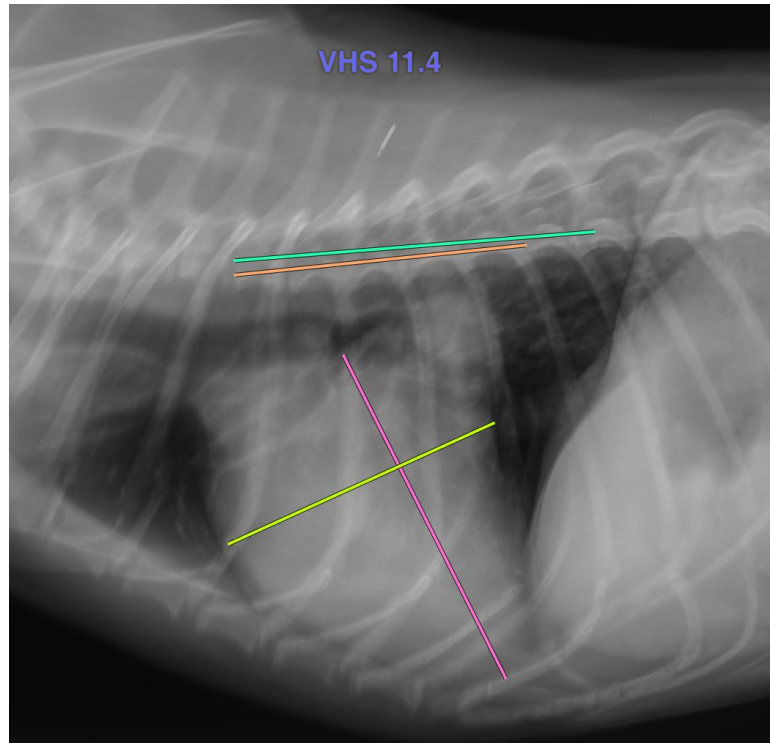
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com