



PATIENT

Gilligan Dubois

PRESENTING CLINICAL SIGNS

Coughing increasingly for the past two weeks and getting progressively worse. Dry/non productive cough. Sounds like he is trying to bring something up (like a cat regurgitating a hairball). Coughed 24 times last Saturday. Still has great energy. E/D well, no S/V/D.

SPECIES

Canine

BM/Urination normal. Coughing randomly i.e. no pattern as to time of the day. Has not frequented the dog park/kennel recently and he is up to date on his KC vaccinations. No history of kenneling, doggy day care etc. Chest X rays have never been performed on patient. Has a history of coughing 2-3 times when he gets excited. Wears a harness now. Sometimes chokes when he eats very dry kibble too fast (the O is now watering down his food)

BREED

Chihuahua

Abnormal PE/Chem/CBC/UA Results: G1-2/6 Left sided murmur diagnosed today. Mild increase in breathing effort noted during exam.

RADIOGRAPHIC STUDY OF THE THORAX

SEX

Male Neutered

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

RADIOGRAPHIC FINDINGS

The vertebral endplates T5/T6 present mild spondylosis formation.

AGE

13 Years, 5 Months

Extending along the caudal half of the right thoracic wall, a well-defined fat opaque subcutaneous mass is seen.

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

River Valley
Veterinary Wellness
Clinic

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.

REFERRING VET

Dr. Devashree Pala

The lung parenchyma presents the expected architecture and there is a mild to moderate ground glass opacification of the lung field in the lateral projection and the right lung lobes in the VD projection; 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.

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RADIOGRAPHIC DIAGNOSIS

- Unstructured interstitial pattern
- Lipoma right thoracic wall
- Spondylosis deformans

DATE

12-21-21



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The unstructured interstitial pattern is very likely a sequela to hypoinflation of the lung parenchyma. A 'real' interstitial pattern is not specific, and potentials include:

SPECIES

Canine

- Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic)
- Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation, acute glomerulonephritis)
- Autoimmune hemolytic anemia (AIHA)
- Polycythemia
- Fibrosis
- Tumor (lymphoma, lymphomatosis carcinogenos, myelocytic leukemia)

BREED

Chihuahua

Consider complementing empirical management by daily inhalation with a sodium chloride inhalant. If clinical signs are refractory to therapy, complementing workup by a bronchoscopy including BAL would be ideal.

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REFERRING VET

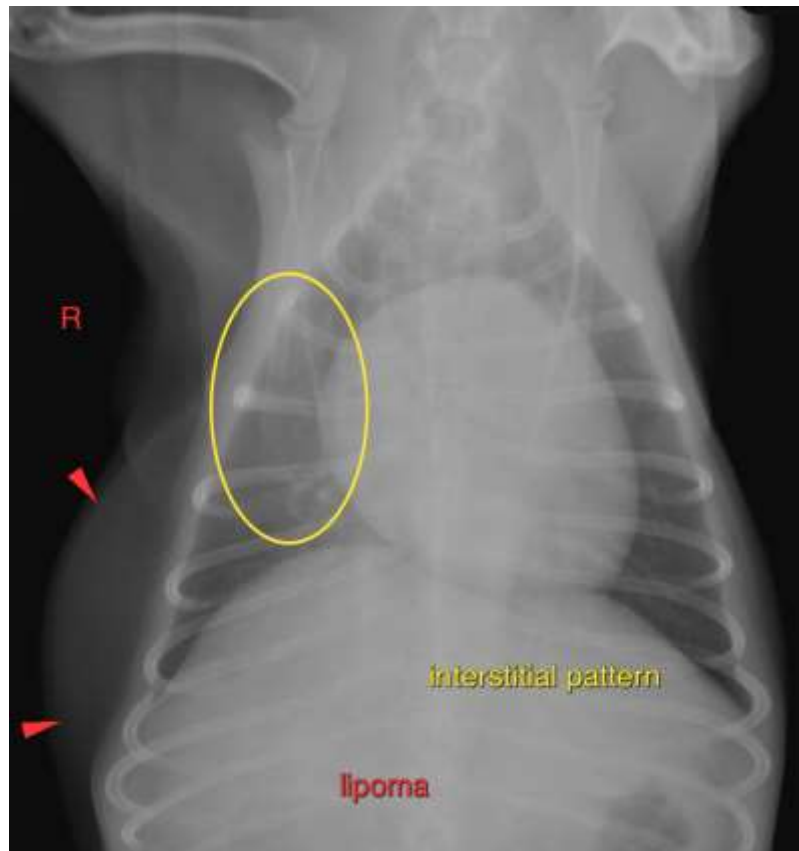
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Chihuahua

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SEX

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