



PATIENT

Bailey Mcdowell

PRESENTING CLINICAL SIGNS

Hx of cough (production of phlegm only) that started last Sunday. Started on Amoxicillin and tapering dosage of prednisone. Initial improvement, but now cough returned. Both day and night. Abnormal PE/Chem/CBC/UA Results: PE - BCS 9/9 HR - 100 RR - panting Temp - 102.2 No cough elicited with tracheal palpation No murmurs auscultated

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RADIOGRAPHIC STUDY OF THE THORAX

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

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RADIOGRAPHIC FINDINGS

The patient presents with obese body condition.

SEX

The surrounding bony structures are within normal limits.

MN

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

7

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 is widened by fat.

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.

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Veterinary Clinic

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.

REFERRING VET

A Waffle

RADIOGRAPHIC DIAGNOSIS

- Obesity

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax presents without abnormal findings of the lung explaining the cough. However, negative radiographs do not rule out inflammatory lower airway disease completely – such as tracheitis or bronchitis (inflammatory versus infectious). Bronchoscopy including BAL can be used as advanced diagnostic test.

DATE

2-12-22

Obesity is also a known predisposing factor for cough.



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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.

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

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