



PATIENT PRESENTING CLINICAL SIGNS

Maynerd Billman

History: Presented 1/14 for evaluation for coughing. Was treated at another veterinary office (no records available) and was started on furosemide, enalapril, pimobendan. No diagnostics were performed. On 1/14, no heart murmur was audible. Recommended thoracic radiographs and echo to evaluate need for ongoing medication. Other diagnostics available (ie. Blood pressure, echocardiogram, etc): Echocardiogram being submitted for evaluation. Primary reason for ultrasound/radiograph referral: Determine if needs to continue cardiac medications or not. Abnormal PE/Chem/CBC/UA Results: Abnormal laboratory findings: 1/14/21 CBC unremarkable, Chem - Cl 104 (108-119), Lip 485, CK 297 (non-fasted lab work), USG 1.007, pH 8, WBC 2/hpf, moderate rods 9/40/hpf 2/2/22 Recheck UA USG 1.026, pH 5, quiet sediment Abnormal physical exam findings: BCS 8/9, periodontal disease grade 2/4, no murmur audible, coughing has diminished per owner.

SPECIES

Canine

BREED

Pomeranian

SEX

Male

RADIOGRAPHIC STUDY OF THE THORAX

A full set of radiographs of the thorax is provided for review.

AGE

12 Years

The body condition score is 9/9.

The periarticular bones of both coxofemoral joints present moderate osteophyte new bone formation.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The extrathoracic soft tissues present homogeneous without abnormalities.

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.

HOSPITAL NAME

North Idaho Animal
Hospital (VCA)

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 caudal cervical segment of the trachea is moderately widened and presents an increased radiopacity - consistent with rotation of the trachea with 'dorsoventral' projection.

REFERRING VET

Dr. Jolee Stegemoller

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.

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

DATE

2-2-22

RADIOGRAPHIC DIAGNOSIS

- Obesity
- Degenerative osteoarthritis shoulder joints bilaterally, R>>L



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax presents without abnormalities, but the obesity of the patient. Obesity is also a known predisposing factor for cough due to impaired pulmonary function and bronchial clearance. No radiographic changes of the heart are appreciated, a cardiac echo has also already performed for further definition.

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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