



PATIENT PRESENTING CLINICAL SIGNS

Diggity Medici

Reason for Visit: COUGH History: P IS A 15YR OLD M/N FOX TERRIER PRESENTING TODAY FOR COUGH. O STATES P SLOWING DOWN MORE. O STATES P BEEN COUGHING FEW WEEKS O CONCERNED POSS COLLAPSING TRACHEA O IS A NURSE. O STATES HAS EPISODES OF COUGHING WHEN WALKING ON LEASH O USES HARNESS. P BEEN LAYING ON TILE FLOOR INSTEAD OF DOG BED LIKE NORMAL. O ALSO REPORTS HEAVY BREATHING. O HAS HAD P FOR 9YRS P HAD A SEIZURE 6 YRS AGO AND P BEEN DEAF SINCE NOTHING ELSE IN HX. O REQUESTS NAIL TRIM.

SPECIES

Canine

BREED

Fox Terrier

SEX

NM

Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no obvious murmur, pulses strong and synchronous, mild wheezing present. EENT: Clear AU - deaf. OS: mature cataract. OD: lenticular sclerosis. No nasal discharge. No cough on tracheal palpation. Non-productive cough in the exam room. Oral cavity: Missing most of his teeth. Moderate to severe dental tartar, moderate gingivitis and gingival recession. Halitosis. Musculoskeletal: BCS = 8/9. Ambulatory x 4 Uro/Perineum: No significant lesions Abd/GI: Soft, non-painful. No masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. No significant abnormalities Skin: Good hair coat. No ectoparasites seen Mentation: BAR Hydration: N

RADIOGRAPHIC STUDY OF THE THORAX

AGE

15 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The body condition score is 8/9.

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

HOSPITAL NAME

DPC Veterinary Hospital

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.

REFERRING VET

Dr. Rivera

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

INVOICE

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

The lung field is extending up to the caudal aspect of T11. The lung parenchyma presents the expected architecture and generalized mild to moderate ground glass opacification; the intrapulmonary vascular branching is seen up to the third order lung vessels.

DATE

3-2-22

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



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RADIOGRAPHIC DIAGNOSIS

- Obesity
- Mild to moderate unstructured interstitial lung pattern

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The unstructured interstitial lung pattern is likely a sequela to the nutritional status and age related changes of the lung parenchyma ± mild fibrosis. Other differentials include pneumonitis (inflammatory versus infectious), systemic disease (e.g. pancreatitis, IMHA, renal disease), neoplasia.

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Obesity is also a known predisposing factor for cough.

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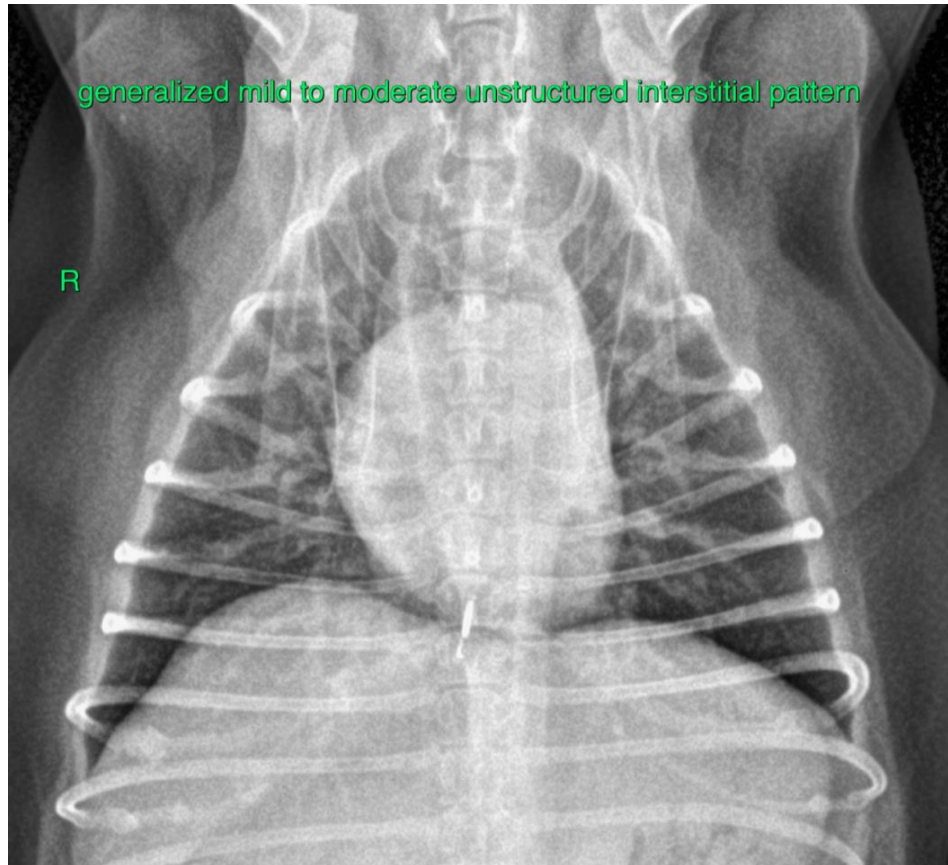
Dr. Rivera

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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.

SPECIES

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