



**PATIENT PRESENTING CLINICAL SIGNS**

**Baby Jones** Reason for Visit: check mouth History: 10 year S/F chihuahua presented today for a foul odor coming from p mouth and o says teeth are "dirty". o noticed 5 days ago when o went to brush p teeth. O brushes teeth when o bathes p. O says p has been coughing once ina while but more frequently at nights now that p is older +/- coughing up fleem like o has been told in past when p was younger.

**SPECIES** C/S/V/D: coughing once in a while E/D/U/D: WNL Diet: Science diet (diet food) FAS Score: 0 Current Medications (dose and frequency): glucosamine in the pm Heartworm Prevention / Flea Prevention: none Known Allergies and Medical Conditions: none Microchip ID: / No microchip

**Canine** Abnormal PE/Chem/CBC/UA Results: Vital Signs Weight: 8.4 Temp: 102.7 HR: 180 RR: 42

**BREED** MM/CRT: gums red Physical Examination Key -- (N= Normal, A= Abnormal) CV/Respiratory: Normal heart rate and rhythm, grade II/VI heart murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear AU. OU: lenticula sclerosis. No nasal discharge. Non-productive cough on tracheal palpation. Oral cavity: Severe periodontal disease, halitosis. Missing some teeth.

**Chihuahua** Musculoskeletal: BCS = 6/9. Ambulatory x 4. Bilateral grade 2/4 MPL 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

**SEX**

**SF**

**RADIOGRAPHIC STUDY OF THE THORAX**

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

10 Years, 4 Months

**RADIOGRAPHIC FINDINGS**

**INTERPRETED BY**

The surrounding bony structures are within normal limits.

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.

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

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.

DPC Veterinary Hospital

Moderate dorsoventral flattening of the cervical tracheal segment is seen. In the lateral projection, kinking of the trachea is seen level with the cranial thoracic aperture.

**REFERRING VET**

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

Dr. Rivera

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.

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**RADIOGRAPHIC DIAGNOSIS**

- Tracheal collapse
- Tracheal kinking level with the thoracic inlet
- No radiographic changes of the cardiovascular system

**DATE**

3-27-23



**PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**Baby Jones** The appreciated tracheal collapse might be a source for cough. The tracheal inking is considered as a sequela to positioning – there are no signs for mass effect and no significant deviation of the trachea in the VD view is appreciated.

**SPECIES** No additional clinically relevant abnormalities are noted.

Canine

**BREED**

Chihuahua

**SEX**

SF

**AGE**

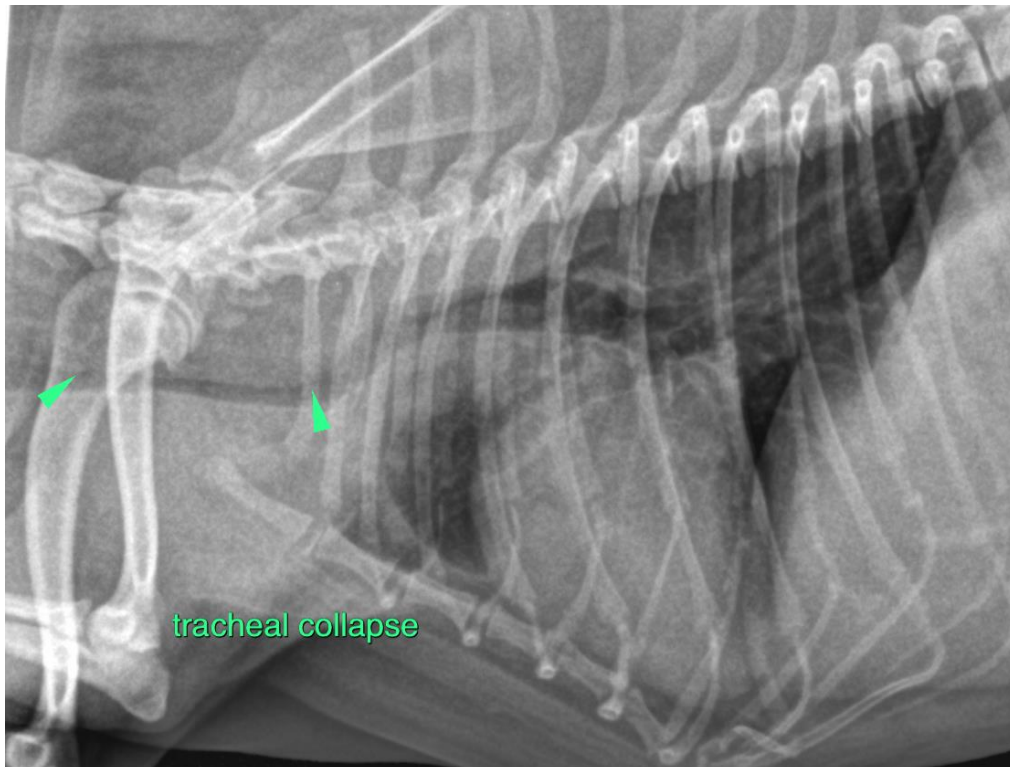
10 Years, 4 Months

**INTERPRETED BY**

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Hospital



**REFERRING VET** 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.

Dr. Rivera

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.

**INVOICE**

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**DATE**

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