



PATIENT PRESENTING CLINICAL SIGNS

Muffy Holmes History: Patient presented for persistent hacking/gagging 1 day duration. X-rays of the chest were submitted yesterday revealing megaesophagus and suspect secondary collapsing trachea. No improvement on cerenia/zeniquin. Hacking is severe/persistent when being handled. Hacking subsides when patient is rested. Patient did eat a large meal while here. X-ray taken immediately after revealed food in stomach

Canine Abnormal PE/Chem/CBC/UA Results: CBC/Chem/normal T4 0.9 N

FLUOROSCOPIC STUDY OF THE NECK & THORAX

BREED

Maltese A fluoroscopic study of the trachea during tidal respiration and a barium swallowing study is provide for review.

FLUOROSCOPY FINDINGS

SEX

Spayed Female Marked narrowing of the caudal cervical tracheal segment is seen which is nearly stationary throughout tidal respiration, becoming mildly widened during expiration.

AGE

10 Years In comparison to the radiographic study, the esophageal dilation is regressive. The esophagus presents a physiological motility. The boluses are propelled into the stomach by primary and secondary waves. The boluses in the esophagus present a physiological shape with a convex caudal border and is tapering in the cranial aspect. There is no evidence of pathological pooling of food in the esophagus. The boluses are propelled through the cardia into the stomach.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

FLUOROSCOPY DIAGNOSIS & THERAPEUTIC RECOMMENDATIONS

- Marked tracheal collapse
- Mild esophageal dilation with physiological motility of the esophagus
- No evidence of esophageal foreign body

HOSPITAL NAME

Gentle Doctor AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Despite the radiographic changes with the megaesophagus appearing as the most significant finding, the fluoroscopic is consistent with severe tracheal collapse. The latter is also considered as the underlying cause for the presenting clinical signs. Tracheitis – allergic versus infectious - might have caused acute deterioration of clinical signs. Tracheal stenting might be an option.

REFERRING VET

Sarah Rotthaus, DVM

INVOICE

14512

DATE

3/31/22



PATIENT

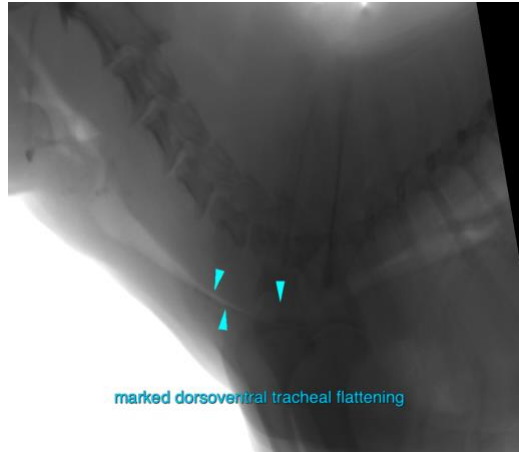
Muffy Holmes

SPECIES

Canine

BREED

Maltese



SEX

Spayed Female

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.

AGE

10 Years

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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