



PATIENT PRESENTING CLINICAL SIGNS

Berkley Azzara
 Xray taken a few years ago and he had something in his air way but wasn't affecting him. A month ago he became more labored in breathing and every day he seems constantly choking and like he can't catch his breath. Has a heart murmur. Berkley also gets disoriented due to the coughing fits and the other day he stumbled down the stairs and passed out.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: CARDIAC MURMUR: IV/VI, SYSTOLIC, LEFT BASE LOUDEST. RATE NOT ACCELERATED. MATURE RIGHT CATARACT. MATURE SLCEROSIS LEFT LENS. MUSCLE ATROPHY TYPICAL OF AGE. STAGE III DENTAL DISEASE WITH VERY INFLAMMED GUMS

BREED

Brittany Spaniel

RADIOGRAPHIC STUDY OF THE NECK & THORAX

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

SEX

Neutered

RADIOGRAPHIC FINDINGS

No abnormalities of the osseous and soft tissue structures of the neck are appreciated.

The surrounding bony structures are within normal limits.

AGE

12 Years

The extrathoracic soft tissues present homogeneous without abnormalities.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The heart is moderately enlarged and occupying approximately 90% of the thoracic height. The trachea is elevated and paralleling the thoracic spine. A prominent wedge shaped soft tissue opacity is seen in the region of the left atrium, causing dorsal deviation of the left principal bronchus. In the VD view. The heart is occupying approximately 90% of the thoracic width; a double opacity is seen in the region of the left atrium and abaxial splaying of the main-stem bronchi is seen. The pulmonary vasculature is within normal limits.

HOSPITAL NAME

Elizabeth Animal Hospital

Superimposed on the imaging plane of the hilar region of the lobar bronchus of the right cranial lung lobe, two mild heterogeneous mineral opaque bodies, measuring approximately between 7 x7 and 10 x 8 mm in size are visible. The right cranial lung lobe presents a mild to moderate mineralizing reticular pattern.

REFERRING VET

Leon Anderson, DVM

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

RADIOGRAPHIC DIAGNOSIS

INVOICE

50822

- Significant generalized left cardiac enlargement without signs of decompensation
- Bronchial foreign body – suspect lobar bronchus right cranial lung lobe – and mineralizing reticular pattern right cranial lung lobe
- Normal neck

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

3-8-22

The main finding is the significant cardiac enlargement, affecting the left side of the heart, myxomatous mitral valve degeneration with mitral valve insufficiency and left cardiac volume overload is the top differential. Underlying cardiomyopathy – dilated cardiomyopathy is a differential but considered less likely. Recommend a cardiac echo for further evaluation of



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cardiac chamber size and function. Based on radiographic changes, cardiac medication appears indicated.

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The mineralized material is fitting the history of bronchial body, that appears to be subclinical since years with evidence of localized interstitial distribution of mineralized material – likely due to resorptive processes of material becoming detached from the foreign material.

BREED

Brittany Spaniel

I consider the cardiac disease as the most relevant finding in this case as there are no overt signs for pneumonia as trigger for the cough and the long standing history of the bronchial foreign material.

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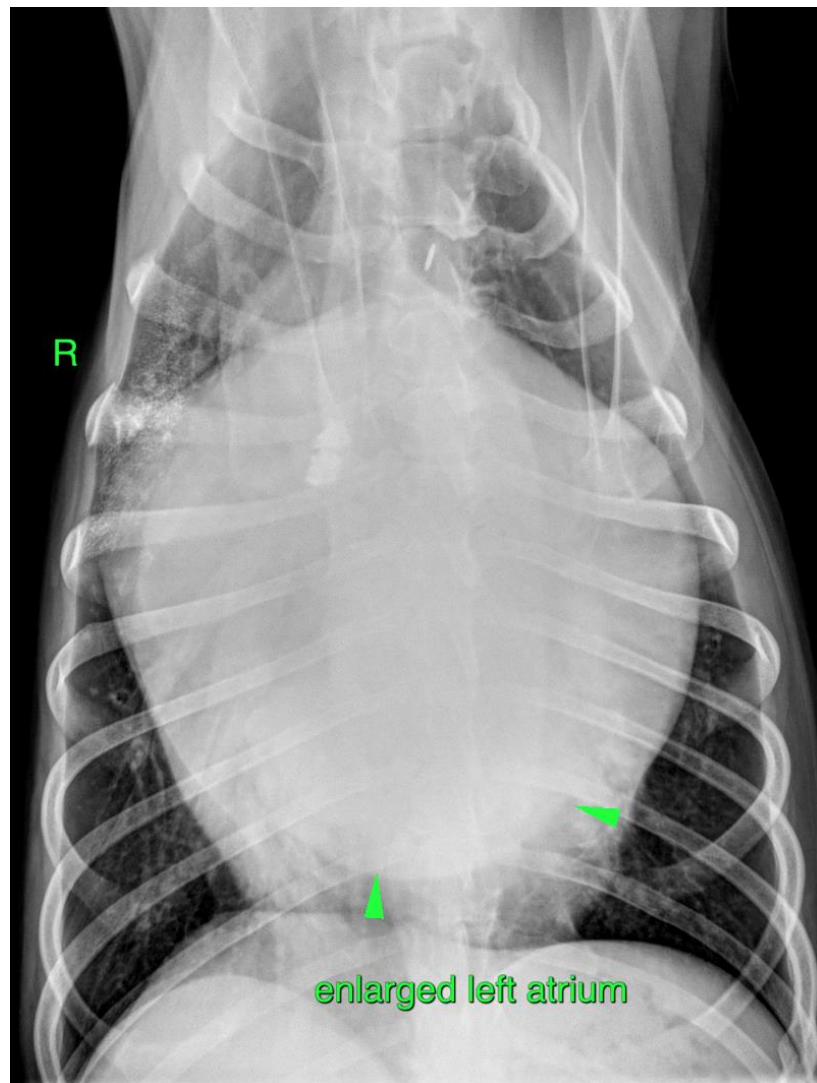
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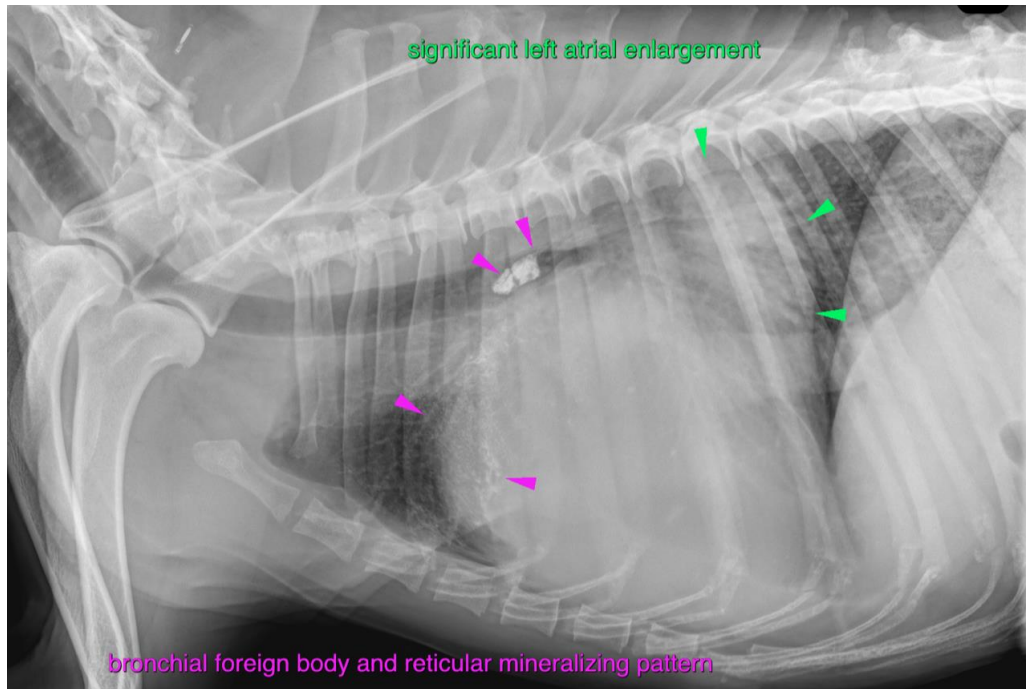
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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