



PATIENT PRESENTING CLINICAL SIGNS

Walter Hutin History: P is presenting for coughing, sneezing and decreased appetite. O left p at the dogsitter house during spring break. 2 - 3 days after O pick him up she started to notice the symptoms. O try monitoring at home, taking off the collar and giving honey but nothing seems to help. P usually go to the groomer and dog perk but hasn't gone recently.

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: Physical Examination Key -- (N= Normal, A= Abnormal)
 Hydration: Appropriately hydrated Mentation: QAR EENT: No nasal discharge; clear no discharge OU; minimal exudate and lots of aberrant hair AU; No cough on tracheal palpation or in room. Oral Cavity: No dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency
 Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur or crackles/wheezing auscultated. Normal bronchovesicular sounds. Abd/GI: Tense non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: N
 Musculoskeletal: Ambulatory x4, no lameness noted. No pain on palpation of limbs. BCS 5/9
 Neurological: Appropriate

BREED

Labradoodle

SEX

Neutered Male

RADIOGRAPHIC STUDY OF THE THORAX

AGE

Radiographs of the thorax in twoimaging planes are provided for review.

1 Year 1 Month

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits, the growth plates are age related open.

The extrathoracic soft tissues present homogeneous without abnormalities.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

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.

HOSPITAL NAME

DPC Veterinary H

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

REFERRING VET

Dr. White

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.

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

INVOICE

14646

RADIOGRAPHIC DIAGNOSIS

DATE

4/8/22



- Normal thorax

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Walter Hutin

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The current set of radiographs of the thorax presents without abnormalities. However, negative radiographs do not rule out tracheitis/bronchitis entirely and radiographs changes lack behind clinical signs. If clinical signs deteriorate or are refractory to empirical management, follow up radiographs are recommended.

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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