



**PATIENT PRESENTING CLINICAL SIGNS**

**Sky Lauterbach** Reason for Visit: COUGH History: 4y6m old chihuahua mix presenting for coughing x 2 weeks. o states p will only cough about 3 times a day, is getting tired more quickly on walks and sounds a bit "raspy" after running. p was exposed to kennel cough 1 month ago.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no debris AU; No cough on tracheal palpation! Oral Cavity: heavy dental tartar present, gingivitis 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. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no palpable organomegaly or abnormalities Uro/Perineum: N Musculoskeletal: Ambulatory x4, no lameness noted. No pain on palpation of limbs. BCS 6/9

**BREED** Chihuahua Mix Neurological: Appropriate

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**SF RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

**AGE** The extrathoracic soft tissues present homogeneous without abnormalities.

**4 Years, 6 Months** 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.

**INTERPRETED BY**

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.

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

**HOSPITAL NAME**

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

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Hospital

The lung field is extending up to the level of the caudal vertebral endplate of T10 – expiration. The lung parenchyma presents the expected architecture and generalized mild increased radiopacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**REFERRING VET**

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

Dr. White

**RADIOGRAPHIC DIAGNOSIS**

- Normal thorax

**INVOICE**

58810

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study of the thorax presents without abnormalities. The increased radiopacity of the lung parenchyma is considered as a sequela to expiration. Be aware that negative radiographs do not rule out possible tracheitis/bronchitis.

**DATE**

6-13-23



### PATIENT

Sky Lauterbach **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.**

### SPECIES

Canine

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.

### BREED

Chihuahua Mix

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)

### SEX

SF

### AGE

4 Years, 6 Months

### INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

### HOSPITAL NAME

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Hospital

### REFERRING VET

Dr. White

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