



PATIENT PRESENTING CLINICAL SIGNS

Mac Davila Rodriguez diagnosed with a 3/5 heart murmur in 11/22 but had no clinical signs at the moment. came in last week for a follow up heart appt. blood pressured was 171/130 and she was coughing. started in medications but per owner she is getting worse and cough has increased.

SPECIES RADIOGRAPHIC STUDY OF THE THORAX

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

RADIOGRAPHIC FINDINGS

BREED The surrounding bony structures are within normal limits.

Schnauzer The extrathoracic soft tissues present homogeneous without abnormalities.

SEX The caudal contour of the cardiac silhouette is steep and the caudal cardiac waist is lost. The vertebral heart score is 11.6 The pulmonary vasculature is within normal limits.

Neutered Male 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.

AGE A soft tissue membrane is mildly bulging ventrally into the lumen of the cervical tracheal segment. The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

13 Years A generalized increased visibility of the bronchial walls is appreciated.

INTERPRETED BY

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

HOSPITAL NAME RADIOGRAPHIC DIAGNOSIS

- Alejandrino Animal Hospital
- Bronchial lung pattern
 - Left sided cardiomegaly without signs of decompensation
 - Redundant tracheal membrane

REFERRING VET

Dra. Olazagasti

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bronchial lung pattern is suggestive for bronchitis and primary inflammatory non-infectious causes – such as lymphocytic plasmocytic, eosinophilic, mixed – and infectious causes (e.g. viral, bacterial, parasitic) need to be considered. The chronicity of clinical signs, is increasing the odds for primary inflammatory non-infectious origin of bronchitis. Bronchoscopy including BAL can be used as advanced diagnostic tool, empirical management can be considered alternatively.

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The left sided cardiomegaly is likely a sequela to mitral valve insufficiency due to myxomatous mitral valve degeneration, at this point there are no signs for decompensation. A cardiac echo can be used for further assessment of cardiac chamber size and function. Complementing blood work by proBNP will also allow specification if there is clinically relevant volume overload of the heart.



PATIENT

Mac Davila Rodriguez

SPECIES

Canine

BREED

Schnauzer

SEX

Neutered Male

AGE

13 Years

INTERPRETED BY

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Dr. med. vet. DipECVDI

HOSPITAL NAME

Alejandrino Animal
Hospital

REFERRING VET

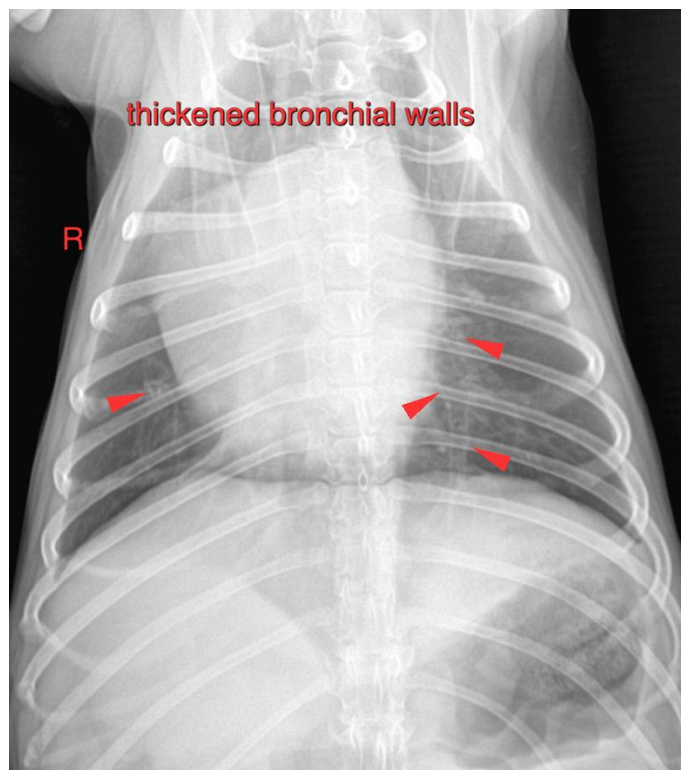
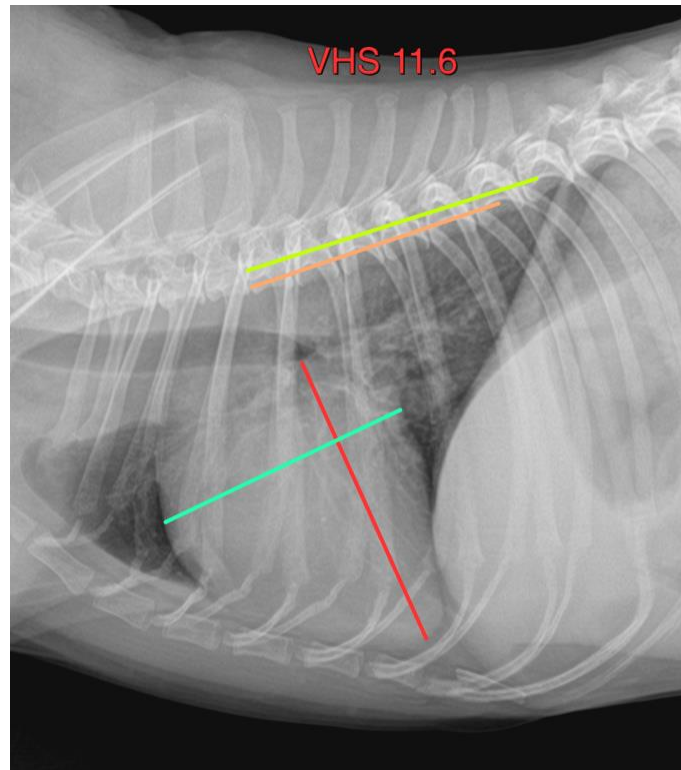
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PATIENT

Mac Davila Rodriguez

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

Schnauzer

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info@sonopath.com

SEX

Neutered Male

AGE

13 Years

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