



PATIENT

Keela Robertson

PRESENTING CLINICAL SIGNS

Coughing-worse at night and when laying down. Had tried vetmedin/fortekor and was a bit better. BNP done in Oct and normal so stopped vetmedin. Is still on fortekor for proteinuria. For the past 6mo periodic flares of coughing every few months. Codeine helps cough. Character of bark is different, more hoarse. I can hear a grade 1 murmur, no one else can so not sure if is just her thorax shape? Is now anemic though and has IRIS stage 2. Chronic hepatitis that will not resolve see sonopath report for abdominal u/s Is on prednisolone for suspect bronchitis as cause of cough, not sure if this is why larynx looks abnormal??

SPECIES

Canine

BREED

Terrier X

RADIOGRAPHIC STUDY OF THE NECK & THORAX

Radiographs of the thorax including the neck in three imaging planes are provided for review.

RADIOGRAPHIC FINDINGS

SEX

FS

A small gas depot is seen in the cranial aspect of the esophagus, caudal to the cricoesophageal sphincter.

Mild generalized mineralization of the laryngeal cartilages is appreciated.

The surrounding bony structures are within normal limits.

AGE

12 Years

The extrathoracic soft tissues present homogeneous without abnormalities.

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

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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

HOSPITAL NAME

Lomsnes Veterinary
Hospital

Generalized mild peribronchial cuffing is appreciated.

The lung field is extending up to the caudal vertebral endplate of T10. The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

REFERRING VET

Dr Hayley Biederbeck

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

RADIOGRAPHIC DIAGNOSIS

INVOICE

52620

- Broncho-interstitial lung pattern
- Incidental mineralization of laryngeal cartilages – age related finding.

DATE

6-28-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The interstitial component of the lung pattern is likely accentuated by the hypoinflation of the lung parenchyma. The bronchial pattern indicates bronchitis and due to the chronicity of the clinical signs I would consider the odds for immune mediate (e.g. lymphocytic plasmocytic, eosinophilic)/allergic bronchitis higher than for primary infectious bronchitis. However, bacterial



PATIENT

Keela Robertson

superinfection is possible.

Chronic renal disease may contribute to the interstitial lung pattern as well.

The cardiac silhouette is considered normal and might appear prominent due to lack of expansion of the lung field and thoracic conformation.

SPECIES

Canine

BREED

Terrier X

SEX

FS

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Lomsnes Veterinary
Hospital

REFERRING VET

Dr Hayley Biederbeck



INVOICE

52620

DATE

6-28-22

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
sebast.schaub@gmail.com