



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Toby McNeal Reason for Visit: new pet general exam + heartworm treatment History: Estimated 4yr old NM mixed breed "Toby" presented today for a general exam and heartworm treatment. P was adopted about 1 week ago - records from humane society indicate P is heartworm positive (no confirmation date or microfilaria test). Os say he has been doing great. No lethargy noticed, still shy around the house. Will want to play at night. Os report coughing episodes followed by spit up/ vomiting bile especially after eating - P eats very fast. Os say heartworm treatment can be covered by adoption center or at a VCA but Os would like done here. P has not received any melarsomine inj. No microfilaria confirmation test (small amount of records - assumption that Doxycycline was not given).

**SPECIES** Canine

**BREED** Mixed

Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: N Oral Cavity: mild tartar upper canines, mild-moderate tartar upper 4th PM's, no gingivitis Lymph Nodes: N Skin: N CV/Respiratory: N Abd/GI: N Uro/Perineum: N Musculoskeletal: BCS 2/9 Neurological: N

**SEX RADIOGRAPHIC STUDY OF THE THORAX**

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

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.  
The extrathoracic soft tissues present homogeneous without abnormalities.

Convex bulging of the cardiac silhouette level with the main pulmonary artery is seen. Int eh lateral view, the (left) pulmonary artery can be appreciated as mild undulating tubular soft tissue opacity, superimposed on the hilar region. The pulmonary arteries are prominent, presenting a greater diameter than the accompanying pulmonary veins

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.

The lung parenchyma - predominantly the right lung lobes, present a moderate ground glass opacity. The bronchial tree presents with multifocal peribronchial cuffing.

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

**RADIOGRAPHIC DIAGNOSIS**

- Enlarged main pulmonary artery and intraparenchymal pulmonary arteries
- Unstructured interstitial lung pattern with bronchial component

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The vascular and pulmonary changes in combination with the history are highly concerning for underlying heartworm infection and secondary parasitic bronchopneumopathy. Testing for potential infection following the guidelines of the "American Heartworm Society" <https://www.heartwormsociety.org> is recommended. A cardiac echo would be beneficial

**INTERPRETED BY**  
Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**  
DPC Veterinary  
Hospital

**REFERRING VET**  
Dr. Feldt

**INVOICE**  
53215

**DATE**  
8-2-22



**PATIENT**

Toby McNeal

to check for worms in the pulmonary trunk.

Due to the lack of cardiac murmur, the odds for congenital anomaly of the heart are low and there are no signs for hyperperfusion indicating left to right shunt.

**SPECIES**

Canine

**BREED**

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**SEX**

NM

**AGE**

4 Years

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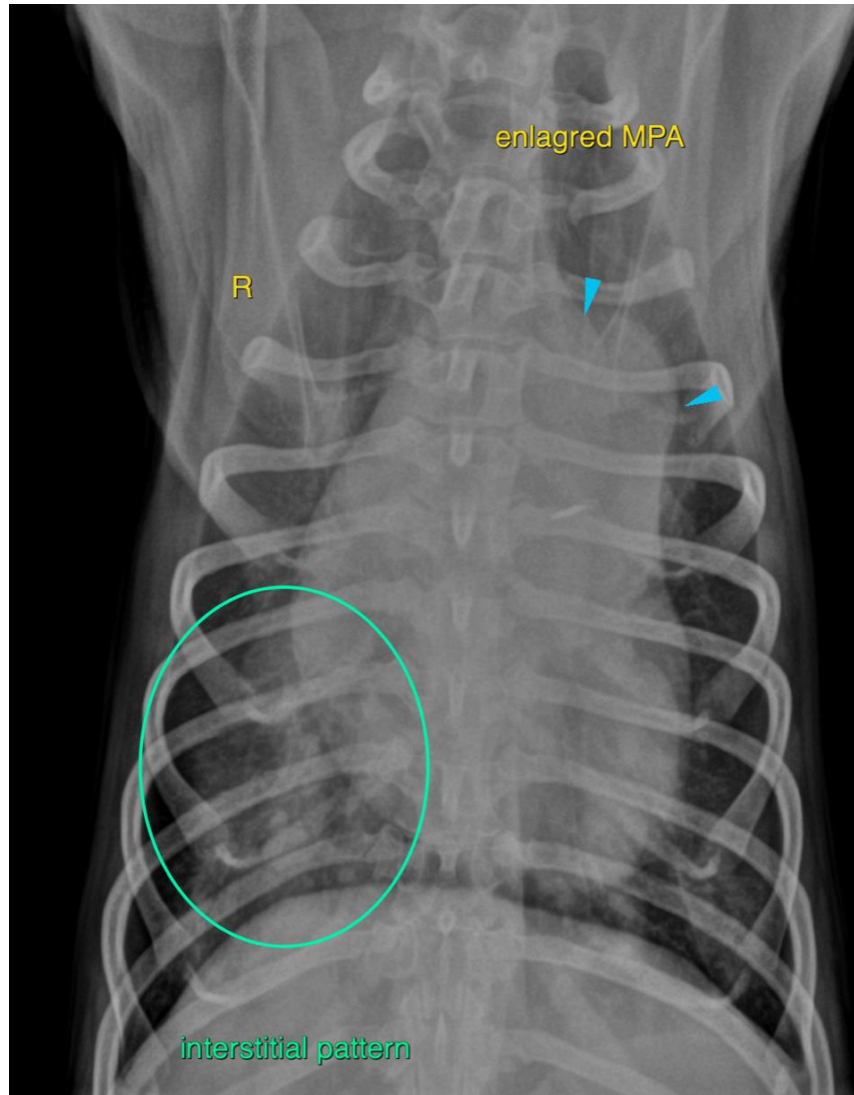
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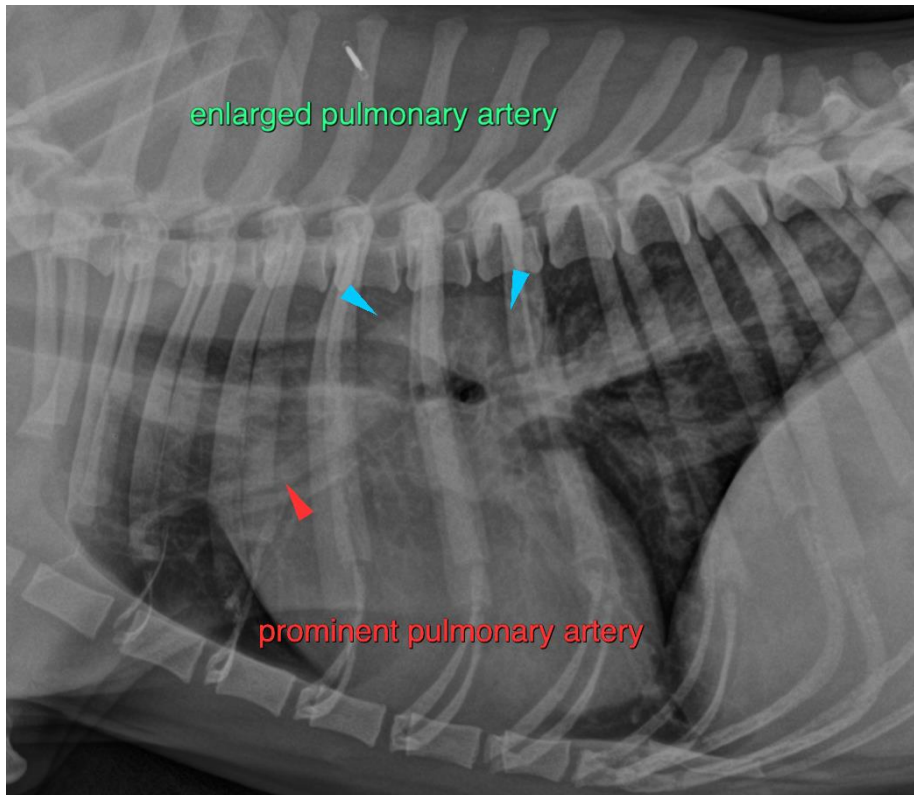
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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