



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Bailey Monroe **PRESENTING CLINICAL SIGNS** History: Has been on enalapril (5mg) BID and vetmedin 5 mg BID for some time for CHF and recently developed tracheal irritant type cough (can be elicited with tracheal irritation). Nonresponsive to lasix BID, then temaril p was tried--no response. Then cerenia and now on 100 mg doxy BID and no change seen.

**SPECIES**

**SPECIES** Canine **Abnormal PE/Chem/CBC/UA Results:** N/A

**RADIOGRAPHIC STUDY OF THE THORAX**

**BREED**

**BREED** A complete set of radiographs of the thorax is provided for review.

**Doodle**

**RADIOGRAPHIC FINDINGS**

**SEX**

**SEX** The surrounding bony structures are within normal limits.

**Spayed Female**

The extrathoracic soft tissues present homogeneous without abnormalities.

The caudal contour of the cardiac silhouette is steep and moderate tenting of the left atrium is visible.

**AGE**

**13 Years**

The left principal bronchus is mildly displaced dorsally in the lateral projection. The vertebral heart score is 11.5. In the VD projection the cardiac silhouette is elongated. The cranial lung vessels are within normal limits.

**INTERPRETED BY**

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

The caudal lung lobes present a moderate ground glass opacification blurring the pulmonary vasculature.

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**

**HOSPITAL NAME** Tracy Nyberg

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

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected. The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

**REFERRING VET**

**REFERRING VET** Kellie Pesola

**RADIOGRAPHIC DIAGNOSIS**

- Unstructured interstitial lung pattern caudal lung lobes
- Left sided cardiomegaly, no signs of decompensation

**INVOICE**

**INVOICE** 13018

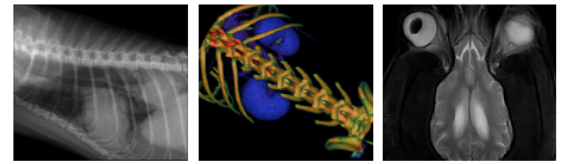
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The unstructured interstitial lung pattern can be accentuated by age related changes of the lung, differential diagnoses include:

**DATE**

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- Infection (bacterial, fungal e.g. candida, viral, Rickettsia, Spirochetes, parasitic)
- Inflammation (allergic e.g. eosinophilic bronchopneumonia and PIE, smoke inhalation, acute glomerulonephritis)



**PATIENT**

Bailey Monroe

- Autoimmune hemolytic anemia (AIHA)
- Polycythemia
- Fibrosis
- Tumor (lymphoma, lymphomatosis carcinogenos, myelocytic leukemia)

**SPECIES**

Canine

As the interstitial lung pattern is not specific, consider bronchoscopy including BAL for further workup. A cardiac echo would be ideal for further evaluation of cardiac chamber size and function.

**BREED**

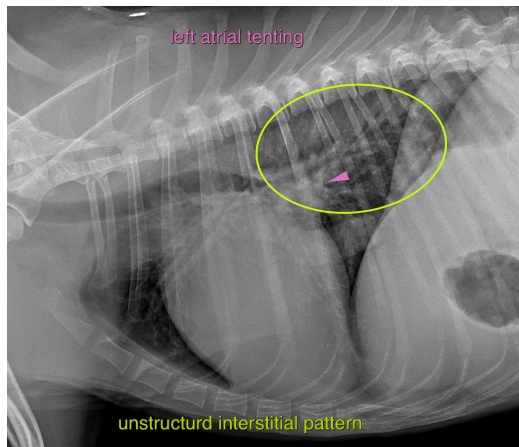
Doodle

**SEX**

Spayed Female

**AGE**

13 Years



**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDDI

The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**HOSPITAL NAME**

Tracy Nyberg

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDDI  
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**REFERRING VET**

Kellie Pesola

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