



**PATIENT PRESENTING CLINICAL SIGNS**

Harvey Hauser History: Hx of CHF controlled with enalapril 1.25 mg BID, lasix 10 mg BID, tussigon 1.25 mg BID-TID, vetmedin 1.25 mg BID. Inc RR for the past 12 hours with shaking and coughing. Otherwise all NSF.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Grade 5/6 L sided systolic heart murmur. MM pink and moist and CRT < 2 sec. RR=64 bpm. CBC/Chem all WNL (BUN 16, creat 0.9). UA=USG 1.010, all else NSF.  
Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**RADIOGRAPHIC FINDINGS**

**SEX** The costal cartilages present advanced degenerative changes. Superimposed on multiple intervertebral disc spaces of the thoracic spine, small mineralized bodies are seen.

Neutered Male The extrathoracic soft tissues present homogeneous without abnormalities.

**AGE** Generalized enlargement of the cardiac silhouette is present, elevating the trachea which is running parallel to the thoracic spine. The cardiac silhouette is occupying approximately 4 intercostal spaces and 80% of the thoracic height and width. The caudal contour of the cardiac silhouette is steep and the caudal cardiac waist is lost. The pulmonary veins of the caudal lung lobes are mildly widened.  
12 Years 11 Months

**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 bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected. The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**HOSPITAL NAME** The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.  
Northvale VC

**RADIOGRAPHIC DIAGNOSIS**

- REFERRING VET**
- Generalized cardiomegaly
  - Mild vascular pattern with prominent pulmonary veins
  - Marked degenerative changes costal cartilages
  - Suspect multifocal chondroid disc degeneration
- Dr. Stefanie Simon

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE** The cardiomegaly in conjunction with the history is considered a sequela to mitral valve insufficiency due to myxomatous mitral valve degeneration. The cardiac enlargement and prominent pulmonary veins indicate left sided volume overload. At this point there is no overt sign for pulmonary cardiogenic pulmonary edema. Increasing dose/dosage interval of furosemide should be considered.  
13289

**DATE**

9/25/21



**PATIENT**

Harvey Hauser

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

Neutered Male



**AGE**

12 Years 11 Months

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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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

**HOSPITAL NAME**

Northvale VC

**REFERRING VET**

Dr. Stefanie Simon

**INVOICE**

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