



PATIENT

Jeep Talbot

PRESENTING CLINICAL SIGNS

Hx. of choking /gagging /coughing last 24 -48 hours after being in a kennel last week , also Hx of eating anything (fabric , toes, plastic ...)

Abnormal PE/Chem/CBC/UA Results: easily to induce cough by touching the laryngeal area , BW indicated mild hyperalbuminemia, hyperglycemia , neutrophilia ,

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

A right & left lateral radiograph of the thorax and a right lateral projection of the abdomen are provided for review.

BREED

Golden Doodle Mix

RADIOGRAPHIC FINDINGS

Thorax

SEX

The surrounding bony structures are within normal limits.

Male Neuter

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

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.

2 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

HOSPITAL NAME

St. Catherine's Animal
Hospital

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.

REFERRING VET

Dr. Masoud

Abdomen

The surrounding bony structures are within normal limits.

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

INVOICE

47550

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in position, size and presents uniform opacity.

DATE

9-27-21

The splenic body and tail are considered normal for position, size, shape and opacity.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.



PATIENT

The stomach is in its anticipated position and presents normal content.

Jeep Talbot

In the cranial abdomen, extending from the level of the gastric pylorus caudally, a mild prominent small intestinal loop containing a mild amount of foamy material is visible. The remainder of the small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

SPECIES

Canine

The colon is seen in the expected position and presents with appropriate content.

BREED

Golden Doodle Mix

RADIOGRAPHIC DIAGNOSIS

- Normal thorax
- Normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Male Neuter

The radiographic study of the thorax and abdomen presents without abnormalities. Given the history, viral infection such as kennel cough is a potential here.

AGE

2 Years

The mild prominent small intestinal loop in the cranial abdomen is considered as the duodenum presenting an ingesta pattern. There is no evidence of radiopaque foreign material or signs for gastrointestinal mechanical obstruction.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

St. Catherine's Animal
Hospital

REFERRING VET

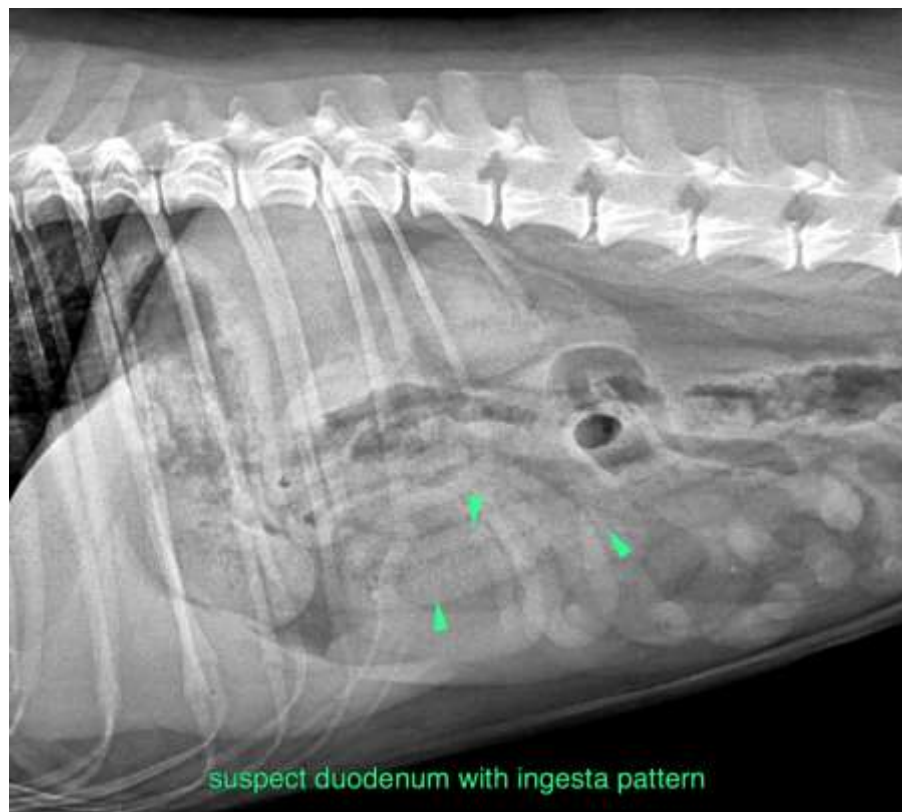
Dr. Masoud

INVOICE

47550

DATE

9-27-21





PATIENT

Jeep Talbot

SPECIES

Canine

BREED

Golden Doodle Mix

SEX

Male Neuter

AGE

2 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

St. Catherine's Animal
Hospital

REFERRING VET

Dr. Masoud

INVOICE

47550

DATE

9-27-21

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com