



**PATIENT**

Harry Beksel

**PRESENTING CLINICAL SIGNS**

Chronic hacking cough for 6 weeks, non responsive to doxy. Grade 1/6 heart murmur today

**SPECIES**

Canine

**RADIOGRAPH OF THE THORAX**

RLR, LLR, DV

**BREED**

Hound

**RADIOGRAPHIC FINDINGS**

The body condition score is 6/9 with smooth alternating layers of fat and soft tissue opacity.

The bony structures appear physiological.

**SEX**

MN

The lungs are in contact with the thoracic boundaries and the tips are pointed. The vascular outline is slightly blurred, and the bronchi are mildly enhanced. Some doughnuts and bronchial calcification are present. In left lateral recumbency an oval, soft tissue opacity is present in the caudo-ventral lung lobe, just cranial to the diaphragm. An air-bronchogram is present.

**AGE**

12 Years, 11 Months

A poorly marginated, soft tissue opacity fills the cranial mediastinum and is partially superimposed onto the tracheal air shadow in left lateral recumbency.

The cardiac silhouette occupies 75% of the chest height and 2.5 intercostal spaces. No chamber or outflow tract enlargement is evident.

**INTERPRETED BY**

Heike Rudolf, DVM,  
Dr. med. Vet.,  
DipECVDI DVR

**RADIOGRAPHIC DIAGNOSIS**

- Cranial mediastinal mass
- Localized alveolar infiltrate right caudo-ventral lobe
- Broncho-interstitial lung pattern

**HOSPITAL NAME**

Blairstown Animal  
Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The cranial mediastinal mass most likely represents a tumor which could be thymic in origin. Differential diagnoses for cranial mediastinal masses are abscess, cyst and granuloma. Ultrasonography with biopsy is recommended to determine the type of tumor which facilitates treatment and allows a prognosis. The circumscribed alveolar infiltrate could represent a consolidated aspiration pneumonia (e.g. inspissated pus), a granuloma or metastasis. A CT examination will allow identification of metastases and will be able to localize the pulmonary mass so that an ultrasound guided biopsy can be discussed.

**REFERRING VET**

Dr. Zeliff

**INVOICE**

49556

**DATE**

1-13-22



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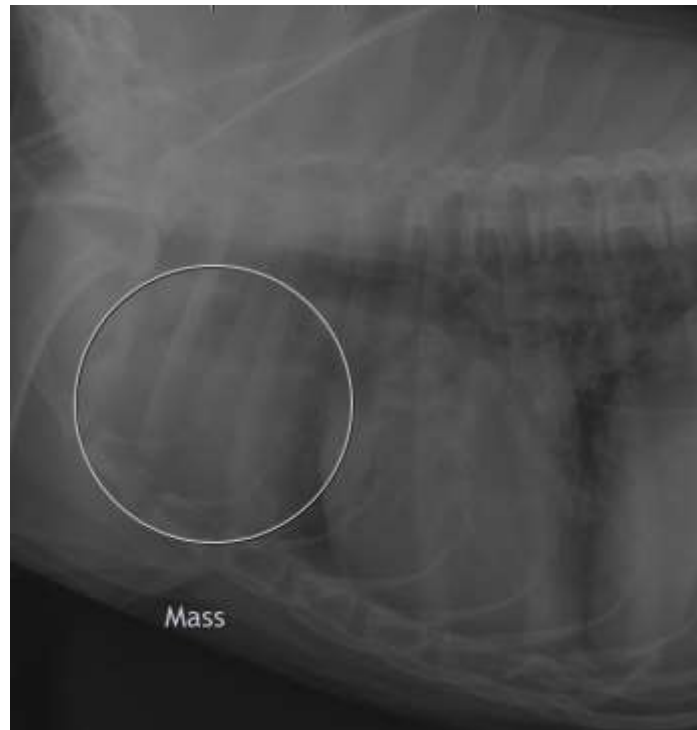
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

Hound

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
Dr.H.Rudorf@gmail.com

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MN

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