



PATIENT

Sam Fuchs-Pritchard

SPECIES

Canine

BREED

Bernese Mtn. Dog

SEX

Neutered Male

AGE

6 Years 6 Months

WEIGHT

89

INTERPRETED BY

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

IMAGING PERFORMED BY

Alina Feury & Alicia
Friedman

HOSPITAL NAME

Blairstown AH

REFERRING VET

Dr. Clegg

INVOICE

35928

DATE

2/20/26

PRESENTING CLINICAL SIGNS

History: HR = 220, severe arthritis in back end, vomiting and diarrhea

RADIOGRAPHIC STUDY OF THE THORAX

The body condition score is 6-7/9.

Only 5 completely formed sternbrae are evident. Ventral spondylosis is present.

The cranial mediastinum is of physiologic size and opacity. The trachea runs parallel and close to the thoracic vertebrae; it dips acutely level with rib T5.

In left lateral recumbency the vessels for the right middle lobe are not visible and a round soft tissue opacity is superimposed onto the cardiac silhouette. In right lateral recumbency the mass is located more dorsally and surrounds the ventrally displaced carina. On the VD the mass extends from rib 4 to rib 10 and is in contact with the thoracic wall. The cranial edge is rounded and partially superimposed onto the cranial lobe; caudally a wedge is superimposed onto the diaphragm. Multiple pulmonary nodules, pea sized and larger, are located in the cranio-ventral lobes and over the diaphragm.

Assessment of cardiac size is hampered by the mass.

RADIOGRAPHIC DIAGNOSIS

- Tumor R middle lobe
- Pulmonary metastases

Incidental findings

- Spondylosis
- Congenital sternum

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are compatible with a pulmonary tumor. Disseminated histiocytic sarcoma has a predilection for Bernese Mountain dogs and is the most likely diagnosis. Differential diagnoses include lymphomatous granulomatosis, anaplastic or giant cell carcinoma. Due to the close proximity of the mass to the rib cage, ultrasound guided sampling is possible. Abdominal ultrasound is recommended to identify dissemination which may be the reason for the GIT signs. Surgery, chemotherapy and corticosteroid treatment are treatment options. A CT (+contrast) of thorax and abdomen is recommended if treatment is considered despite the pulmonary metastases



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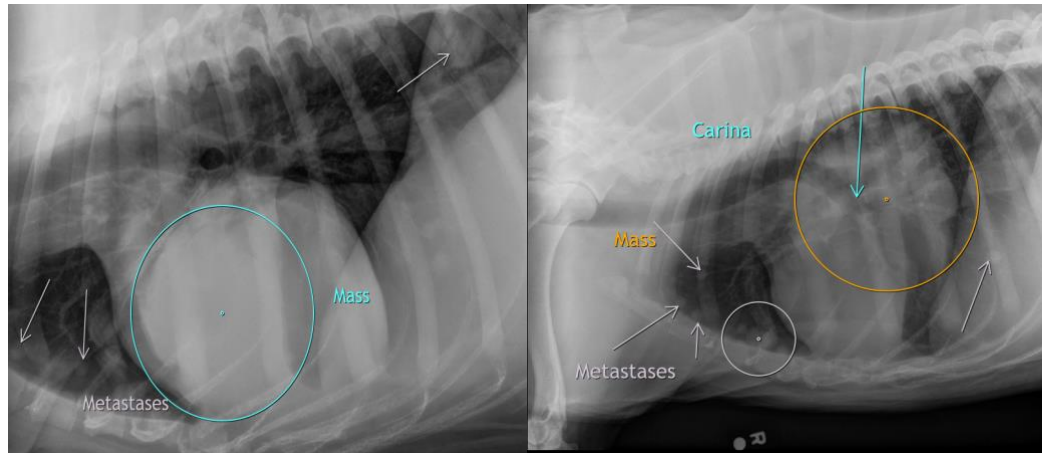
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Heike Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
info@sonopath.com