



**PATIENT PRESENTING CLINICAL SIGNS**

**Sadie Brooks** History: Chronic BW Loss; Abdominal US shows suspected splenic Carcinoma  
 Abnormal PE/Chem/CBC/UA Results: Chronic BW Loss; Abdominal US shows suspected splenic Carcinoma

**SPECIES RADIOGRAPHIC STUDY OF THE THORAX**

**Canine** The body condition score is 5/9 with smooth alternating layers of fat and soft tissue opacity.

**BREED** T10/11 shows new bone formation and straight ventral border of T11 vertebral body. The dorsal spinous process of T10 shows undulating new bone on the cranial aspect with variable degrees of thickness. Spondylosis is present in the cranial thoracic spine and facet arthropathy affects T11-13.

**GSD**

The bony structures appear physiological. The surrounding bony structures are within normal limits.

**SEX**

**Spayed Female** The cranial lung lobes are caudally displaced, especially the right one. The other lung lobes s are in contact with the thoracic boundaries and the tips are pointed. The lobar vessels are clearly visible to the tertiary branches. The bronchial tree is thin walled and tapers uniformly towards the periphery.

**AGE**

**9 Years** The cranial mediastinum shows a round soft tissue opacity which displaces the lung lobes caudally, especially on the right side.

The cardiac silhouette occupies 75% of the chest height and 2.5 intercostal spaces (VHS 10 ). No chamber or outflow tract enlargement is evident.

**INTERPRETED BY RADIOGRAPHIC DIAGNOSIS**

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

- Cranial mediastinal mass
- New bone dorsal spinous process T10 and facet joints T10/11

**HOSPITAL NAME** Incidental findings

Summit Dog & Cat  
 Hospital

- Facet arthropathy
- Spondylosis

**REFERRING VET INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**Dr. Traci Vogler** The cranial mediastinal mass may be primary (lymphoma, thymic tumor) or represent metastatic spread. Abscess, cyst and granuloma are differential diagnoses. The changes at T10/11 are most likely due to arthrosis but tumor or infection cannot be ruled out. A CT examination is recommended for further evaluation of spine and mediastinum. Ultrasound will help guide the needle for a biopsy of the mediastinal mass.

**INVOICE**

12768

**DATE**

8/26/21



**PATIENT**

Sadie Brooks

**SPECIES**

Canine

**BREED**

GSD

**SEX**

Spayed Female

**AGE**

9 Years



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.

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**INTERPRETED BY**

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

**HOSPITAL NAME**

Summit Dog & Cat  
Hospital

**REFERRING VET**

Dr. Traci Vogler

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