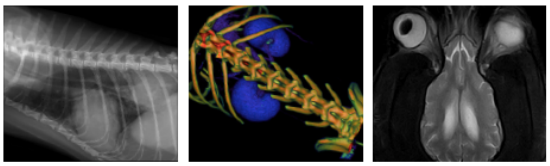
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Luna Brexel

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

1 Year

INTERPRETED BY

Nele Eley (Ondreka), DVM Dr. med. vet., DipECVDI

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Dr. Meaux

INVOICE

37069

DATE

4/21/22

PRESENTING CLINICAL SIGNS

Presented to internist due to chylous effusion. Appears to be resolving. About 2 weeks ago the pet was in a boat and possibly hit the dock while jumping off. Thoracocentesis was performed then and last week. Today only a very small of fluid was noted prior to CT.
Abnormal PE/Chem/CBC/UA Results: *Nele to read. Unremarkable echocardiogram and abdominal ultrasound.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post-contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A mild amount of pleural effusion is seen within the left pleural cavity. The left lung lobe margins are mildly retracted from the thoracic wall and rounded. A mild amount of pleural gas is seen within the left pleural cavity. Small subpleural and mediastinal gas accumulations are present as well.

No structural evidence of pulmonary injury is seen. There is no evidence of pulmonary masses or nodules. No structural abnormality in terms of masses or nodules is seen within the pleural space.

There is no evidence of perforating thoracic wall injury.

Moderate symmetric sternal lymphadenomegaly is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild liquid pneumothorax accentuating the left pleural cavity
- Minimal pneumomediastinum
- Moderate sternal lymphadenomegaly

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals mild liquid pneumothorax. The fluid is known to represent chylous effusion. No structural evidence of pulmonary pathology is identified on the CT study, and a prior echocardiogram was unremarkable. Post-traumatic chylothorax is considered likely based on the patient history and CT findings. Thoracic duct injury is known to occur after blunt trauma. The presence of air within the pleural space and mediastinum may be iatrogenic due to prior puncture, or may represent mild post-traumatic pneumothorax and pneumomediastinum as well.

The sternal lymphadenomegaly is compatible with reactive hyperplasia. Consider further clinical monitoring as well as repetition of the imaging studies, either by means of recheck radiographs or recheck CT to monitor the complete remission of the pleural effusion New imaging is also advised anytime clinical signs reoccur.

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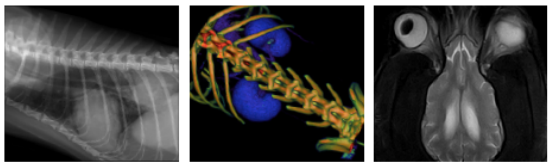

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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
Nele.Eley@sonopath.com