



**PATIENT**

Rocco Earley

**PRESENTING CLINICAL SIGNS**

9 yo MN Lab - coughing of few month duration. Previously found to have focal alveolar pattern in right caudal lung lobes - treated with 4 weeks of broad spectrum antibiotics. Alveolar pattern resolved on recheck radiographs, but coughing is persistent. CT performed first. Following up this CT with bronchoscopy and BAL. Also has history of IBD - on chronic budesonide steroids. Abnormal PE/Chem/CBC/UA Results: Intermittent hacking cough. otherwise normal PE. Mildly increased liver enzymes (ALP>ALT).

**SPECIES**

Canine

**BREED**

Labrador Retriever

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN**

Plain and post contrast studies in soft tissue, bone, and lung windows available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

MN

**Thorax**

Mineralization of the larger airways is noted. There is no evidence of significant bronchial wall thickening. No abnormal content is seen within the bronchial tree and no significant interstitial or alveolar pulmonary changes are noted. Occasional age related incidental pulmonary osteomas are seen.

**AGE**

9 Years

The mediastinal lymph nodes present within normal limits.

The cardiovascular structures present within normal limits.

Course and width of the trachea are considered within normal limits.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**Abdomen**

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**HOSPITAL NAME**

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The urinary bladder is severely distended. No abnormal content and no wall abnormalities of the urinary bladder are seen.

**REFERRING VET**

Dr. Ashley Gold

Occasional cortical renal infarcts are noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

Occasional faintly hyperenhancing small splenic nodules are seen.

**INVOICE**

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The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**DATE**

6-27-23

The pyloric wall presents mild diffuse thickening and mildly obscured outline.

The bony and surrounding soft tissue structures reveal no abnormalities.



**PATIENT**

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Mineralization of the larger airways. No other significant bronchopulmonary changes.
- No CT evidence of cardiovascular pathology.
- Splenic nodules.
- Bilateral cortical renal infarcts – likely incidental.
- Suspect gastritis/gastroduodenitis.

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**BREED**

Labrador Retriever

The CT study reveals only subtle changes of the bronchial tree. The mineralization of the larger airway may be incidental and within age related normal limits. However, underlying chronic airway disease such as eosinophilic bronchopneumopathy or infectious bronchitis cannot be ruled out entirely. Correlation with the results of the bronchoscopy and BAL recommended. At this time, there was no evidence of an interstitial or alveolar infiltrate of the lung.

**SEX**

MN

Differential diagnosis for the splenic nodules includes lymphoid hyperplasia and extramedullary hematopoiesis primarily. A neoplastic infiltrate such as lymphomatous or metastatic cannot be ruled out entirely but is considered unlikely.

**AGE**

9 Years

**INTERPRETED BY**

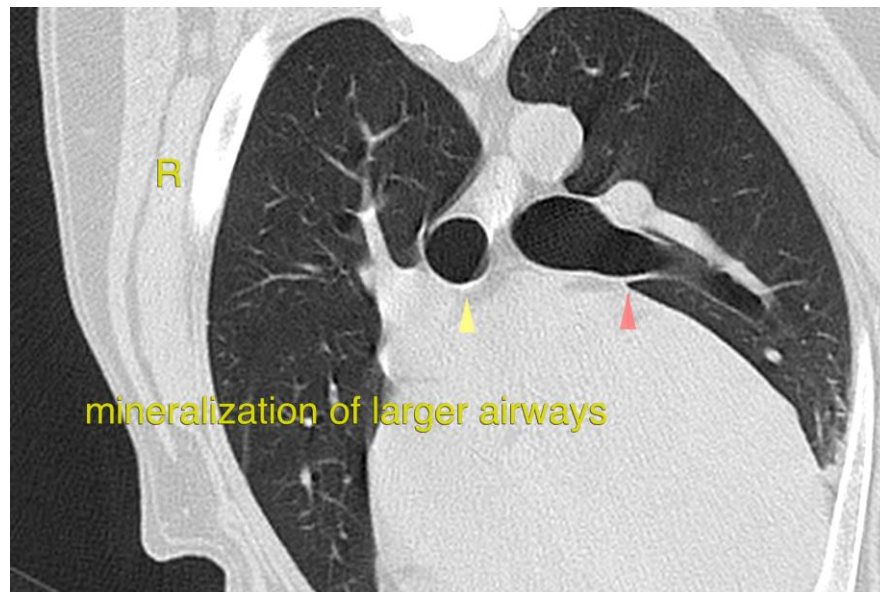
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**DATE**

6-27-23

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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