



PATIENT

A23-017638 NHS

PRESENTING CLINICAL SIGNS

Nebraska Humane Society Animal Cruelty Investigation - domestic violence case. Reported male/female domestic dispute. Male reportedly fired multiple shots at close range into the canine who was kenneled at the time.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: N/A

BREED

Labrador Retriever

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, & ABDOMEN

Post-mortem study with extensive pneumatosis throughout the soft tissues secondary to post-mortem artifacts.

SEX

Intact Male

COMPUTED TOMOGRAPHIC FINDINGS

Multiple metal attenuating bullet fragments can be seen in the soft tissues of the neck, thorax, and pelvis. Most of the bullet trajectories appear to have penetrated the patient from the left hand side towards the right hand side.

AGE

10 Months

Neck

A large bullet fragment is situated to the right of the 3rd cervical vertebra within the paraspinal soft tissues.

A second large bullet fragment is present to the right of the 7th cervical vertebra in the paraspinal soft tissues. Multiple smaller bullet fragments are seen in this area as well.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The C6 and C7 cervical vertebrae present comminuted fractures with severe vertebral canal stenosis and displacement of bone fragments inside the vertebral canal in the position of the dural tube.

HOSPITAL NAME

Gentle Doctor Animal Hospitals

Thorax

There is a right hand sided rib fracture in the proximal third of the 4th right rib and a fracture of the caudal margin of the left scapula.

Multiple small bullet fragments are seen within the lung. Bullet fragments are also seen within the ventral wall of the trachea. A defect of 15mm length is seen in the ventral tracheal wall level with the thoracic inlet in the trajectory of a small bullet fragment.

REFERRING VET

Pete Bashara, DVM

Multiple small bullet fragments are seen within the myocardial tissues, pericardium, and endocardium of the heart. One small bullet fragment is seen in a penetrating defect of the right free ventricular wall. A small bullet fragment is seen in the cranial thoracic descending aorta.

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59610

Abdomen

A bullet trajectory can be traced from the left proximolateral thigh to the cranial margin of the acetabulum which is fractured. The trajectory is then deviated ventrally and medially with multiple bullet fragments being positioned in the left medial thigh musculature in the area of the femoral artery.

DATE

8-1-23

Skull



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The neurocranium is not fully included. Pneumatosis cerebri is seen as a post-mortem artifact. No fragments can be identified in the included portion of the neurocranium and facial cranium.

SPECIES

Canine

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Post-mortem confirmation of multiple fatal firearm injury involving the lung, heart, cervical spine, and traumatic tracheal rupture.
- Additional firearm injury of the left thigh with acetabular groove fracture and potential for femoral artery injury.

BREED

Labrador Retriever

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms multiple fatal firearm injury. Each of the following injuries alone is potentially fatal:

SEX

Intact Male

- Multiple penetrating firearm injury of the heart.
- Multiple penetrating firearm injury of the lung.
- Firearm injury of the trachea.
- Multiple comminuted fractures of the C6 and C7 vertebrae with presumed injury of the spinal cord.

AGE

10 Months

Additional injuries exist involving the hip joint as well as the region of the left femoral artery. There also is a fracture of the left scapula and right 4th rib, respectively.

INTERPRETED BY

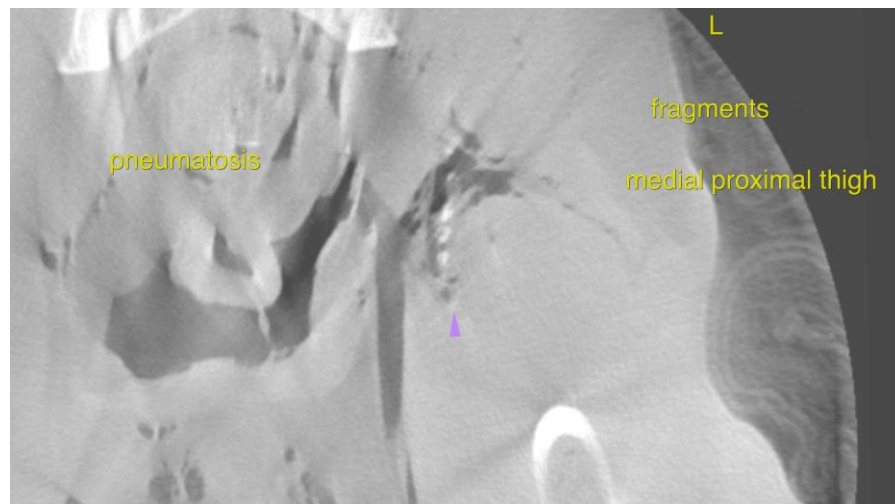
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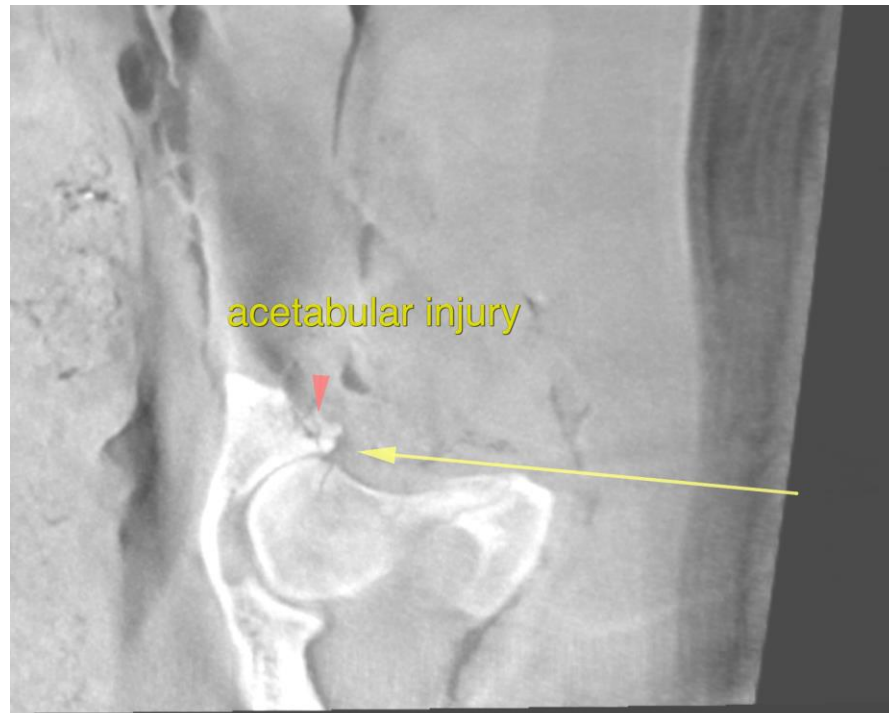
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acetabular injury

fragment trajectory
L proximal thigh



bullet fragments &
comminuted fractures C6 & C7



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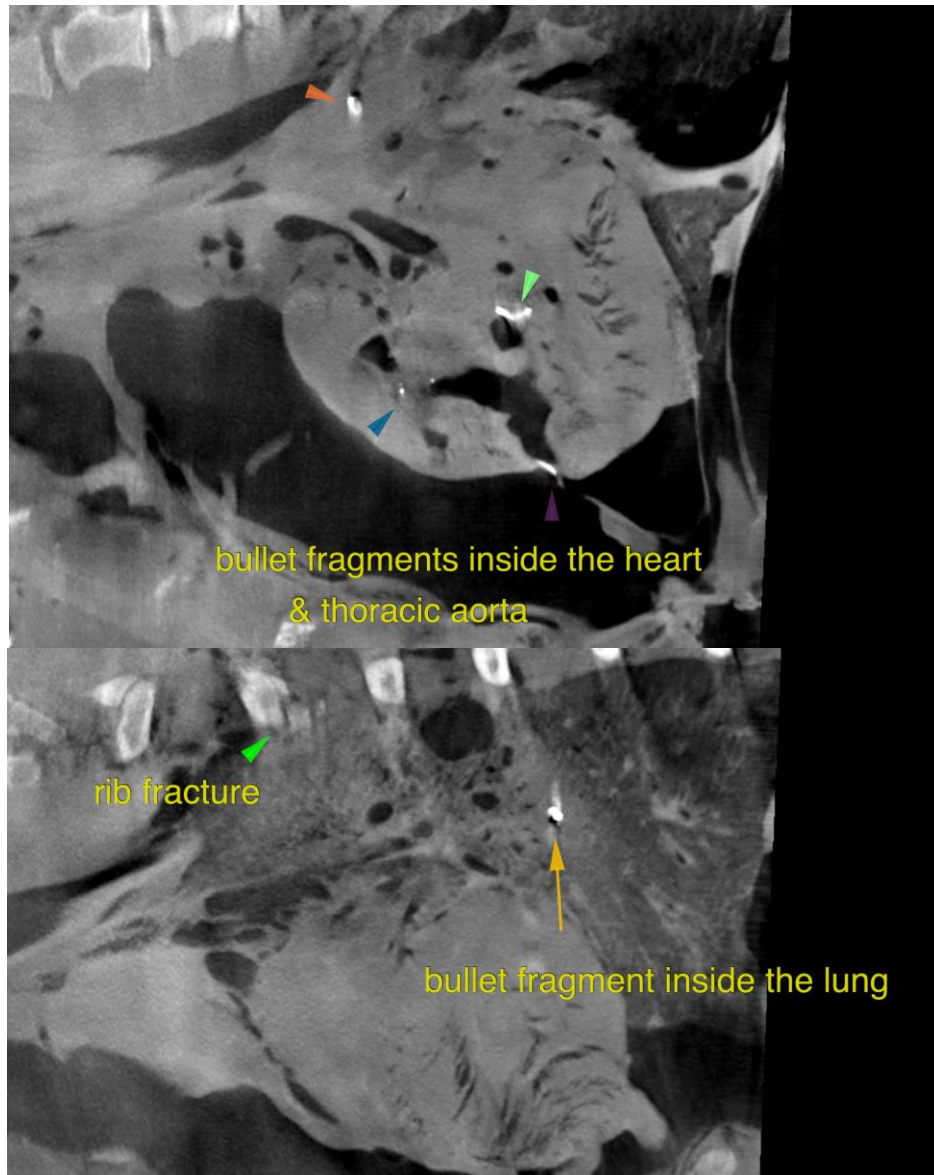
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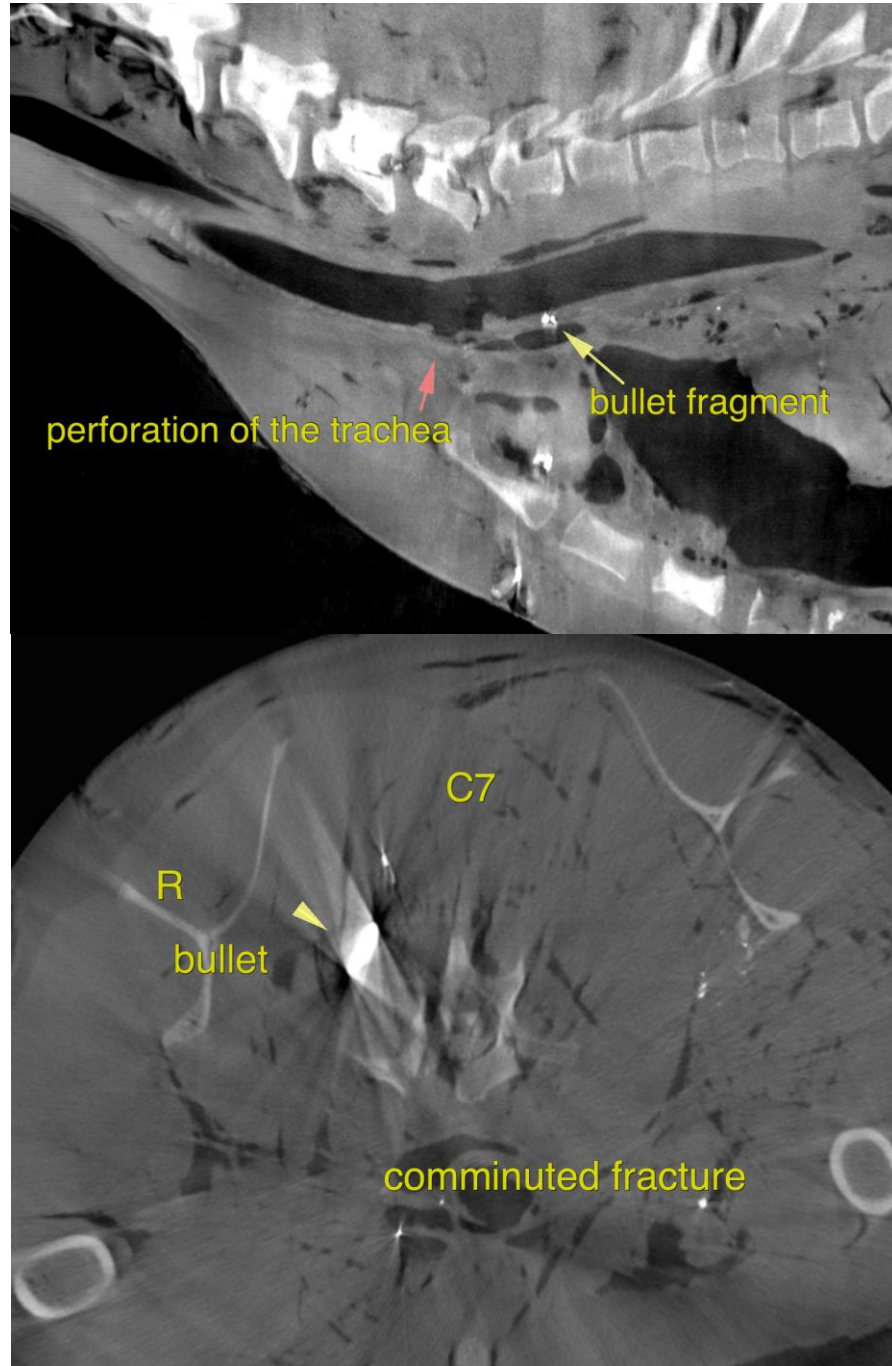
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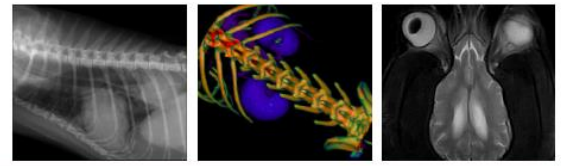
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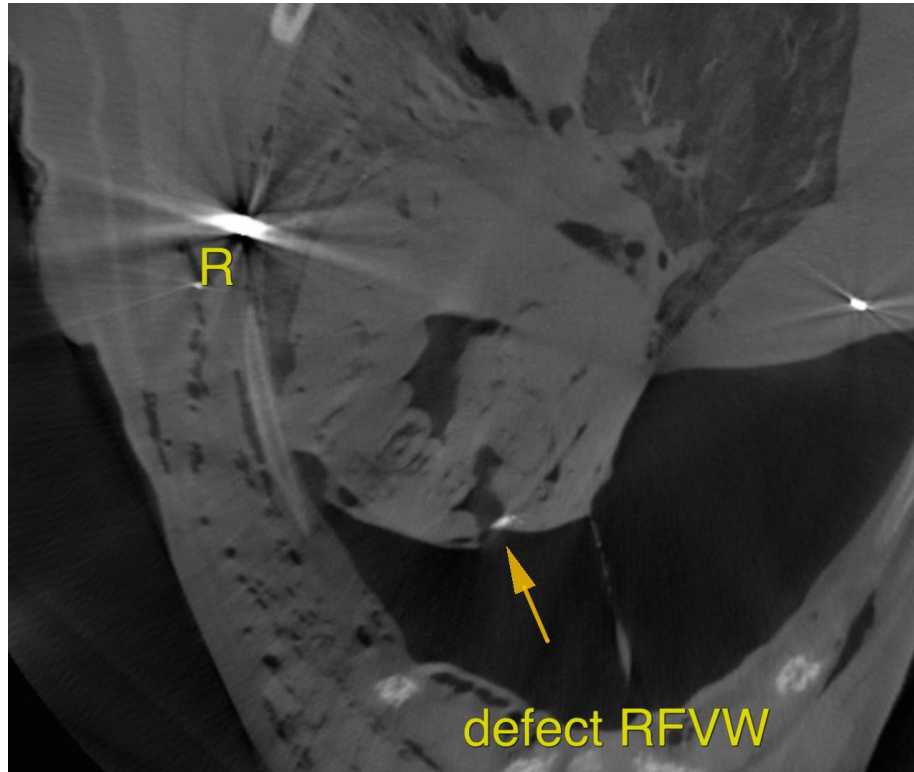
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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