



PATIENT

Bennie Mitchum

PRESENTING CLINICAL SIGNS

Bennie is a 11 Yrs. 7 Mos. old Neutered Male Boxer Mix owned by Jill Mitchum that was referred to CARE Surgery Center by Dr. Julie Peters who examined Bennie at Apollo North Animal Hospital for an AUS with Dr. Babyak on 08.09.2023. Dr. Babyak noted an enlarged gallbladder and recommended a cholecystectomy. On 08.07.2023 Bennie was seen by Dr. Peters for lack of energy, soft stool, and low appetite. Owner reported that Bennie has a hacking cough after drinking water. Upon exam Dr. Peters noted pendulous abdomen, liver feels enlarged, no painful abdomen when palpated. Bennie has been lethargic and hyporexic for a couple of weeks in spite of being offered multiple different options including home-cooked diet, baby food, cat food, etc. His stools have been green, owners suspect from dental chews which are the only thing he will consistently eat. He was vomiting initially but since starting Cerenia that has resolved. He has a known lung nodule and a history of osteoarthritis. Bennie has a history of Valley Fever approximately 10 years ago and has tested annually since then, with most recent titers being negative.

SPECIES

Canine

BREED

Mixed

SEX

NM

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies of the thorax are available for review.

AGE

11 Years

COMPUTED TOMOGRAPHIC FINDINGS

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

HOSPITAL NAME

CARE Surgery Center

A 10mm sized mineralized interstitial pulmonary nodule is seen ventrally within the accessory lung lobe. See image below. The remainder of the lung and bronchial tree present within normal limits.

REFERRING VET

Samantha Parkinson

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

Mild generalized enlargement of the liver is noted. Attenuation and enhancement of the liver present within normal limits.

INVOICE

59766

A 12mm sized cyst is seen in the cranial pole of the right kidney.

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

8-16-23

- Normal CT presentation of the trachea, bronchial tree, and cardiovascular structures.
- Single mineralized interstitial nodule in the accessory lung lobe.
- Mild hepatomegaly.
- Right sided cortical renal cyst.



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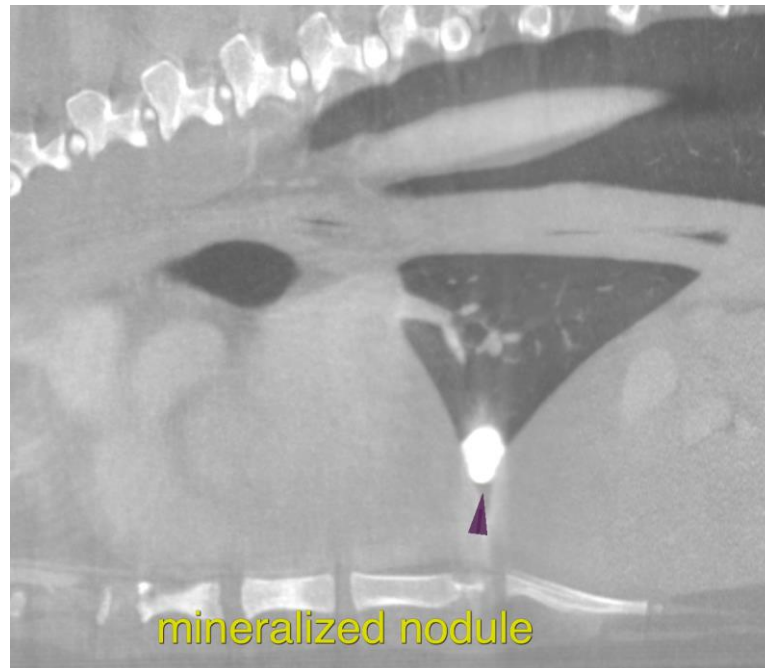
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mineralized nodule in the ventral aspect of the right accessory lung lobe is likely to represent a fibrotic nodule with dystrophic mineralization. Mucinous gland mineralization, heterotopic bone, and mineralizing metastases cannot be ruled out entirely but are thought by far less likely. The remainder of the lung and bronchial tree present within normal limits.

The thoracic and cervical trachea present within normal limits as well. The cause of the cough is unclear.

The cardiovascular structures present within normal limits.

Mild hepatomegaly is noted. Vacuolar hepatopathy is considered likely. Metabolic, endocrine, inflammatory/infectious, and infiltrative disease cannot be ruled out entirely.



INVOICE

59766

DATE

8-16-23

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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