



PATIENT

Sperry Cullen

PRESENTING CLINICAL SIGNS

Attacked by a much bigger dog 3-4 days ago. Seen at ER and rDVM. Radiographs Conclusion: 1. Right thoracic body wall trauma, penetrating wound and subcutaneous emphysema 2. Focal pleural effusion, right hemithorax –Primary differential diagnoses pleural effusion/hemorrhage associated with the reported dog bite wound 3. Alveolar pattern, right lung lobe – differential diagnosis includes pulmonary contusion, penetrating pulmonary trauma associated with the bite wound injury or a combination thereof. 4. Urolithiasis

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: A couple of scabs present on the Right under arm area. Several scratches on skin along with moderate bruising of the Left thorax. Radiographs report attached

BREED

ShihPoo

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies available for review.

SEX

Male Neutered

COMPUTED TOMOGRAPHIC FINDINGS

Soft tissue swelling and fat stranding are seen in the right axillary region including the right brachial plexus area.

AGE

10 Years

An acute complete fracture of the 3rd right rib is seen within its ventral third with medial displacement of the ventral fracture fragment. The adjacent right cranial lung lobe reveals regional alveolar infiltrate with maintained pulmonary volume.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Nondisplaced incomplete fractures of the right 4th and 5th rib are seen.

The intercostal muscles and soft tissue of the right thoracic wall are ill-defined and swollen level with the 4th right intercostal space. Lateral protrusion of the atelectatic right middle lobe appears to be present beyond the limits of the intercostal musculature.

HOSPITAL NAME

Mobile Pet Imaging

Regional accumulation of soft tissue attenuating material with extrapleural sign is noted in the mid and ventral aspect of the right hemithorax. No evidence of pneumothorax.

The remainder of the lung presents within age related normal limits.

REFERRING VET

Meaux

No evidence of spinal injury is seen.

Prominence of the esophageal wall is noted.

Small calculi are present within the renal diverticuli of both kidneys.

INVOICE

47599

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Traumatic injury of the right thoracic wall with displaced rib fracture of the 3rd right rib and nondisplaced incomplete fractures of the 4th and 5th right ribs.
- Disruption of the intercostal muscles with protrusion of the right middle lobe level with the 4th intercostal space.
- Pulmonary contusion/hemorrhage within the right cranial lobe.
- Regional pleural effusion/pleural hematoma in the right hemithorax.
- No evidence of pneumothorax.

DATE

9-29-21



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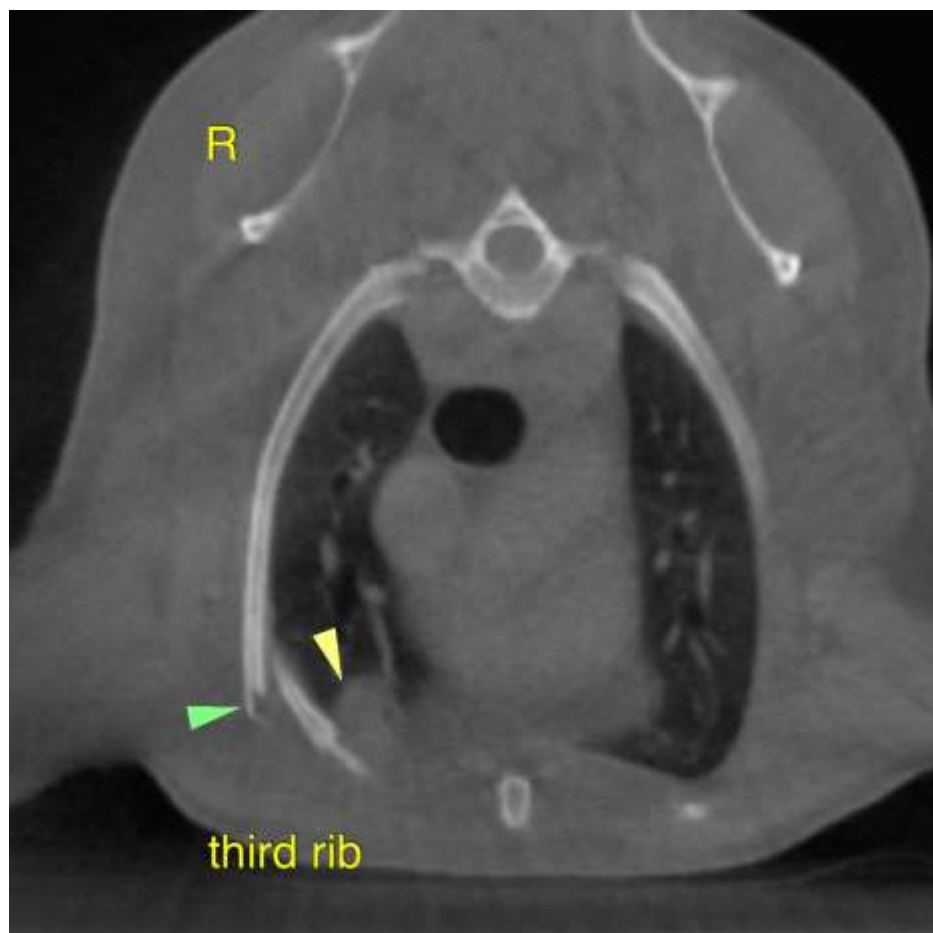
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with traumatic injury of the right thoracic wall. Perforation of the intercostal muscles appears to be present level with the 4th right intercostal space. A displaced rib fracture of the 3rd right rib is present with adjacent alveolar pulmonary infiltrate in the right middle lobe which is compatible with either contusion or pulmonary hemorrhage. Regional pleural hemorrhage/hematoma appears to be present as well. There is no evidence of pneumothorax or other indication of perforating pulmonary injury at this point. The potential of right brachial plexus injury cannot be ruled out entirely.





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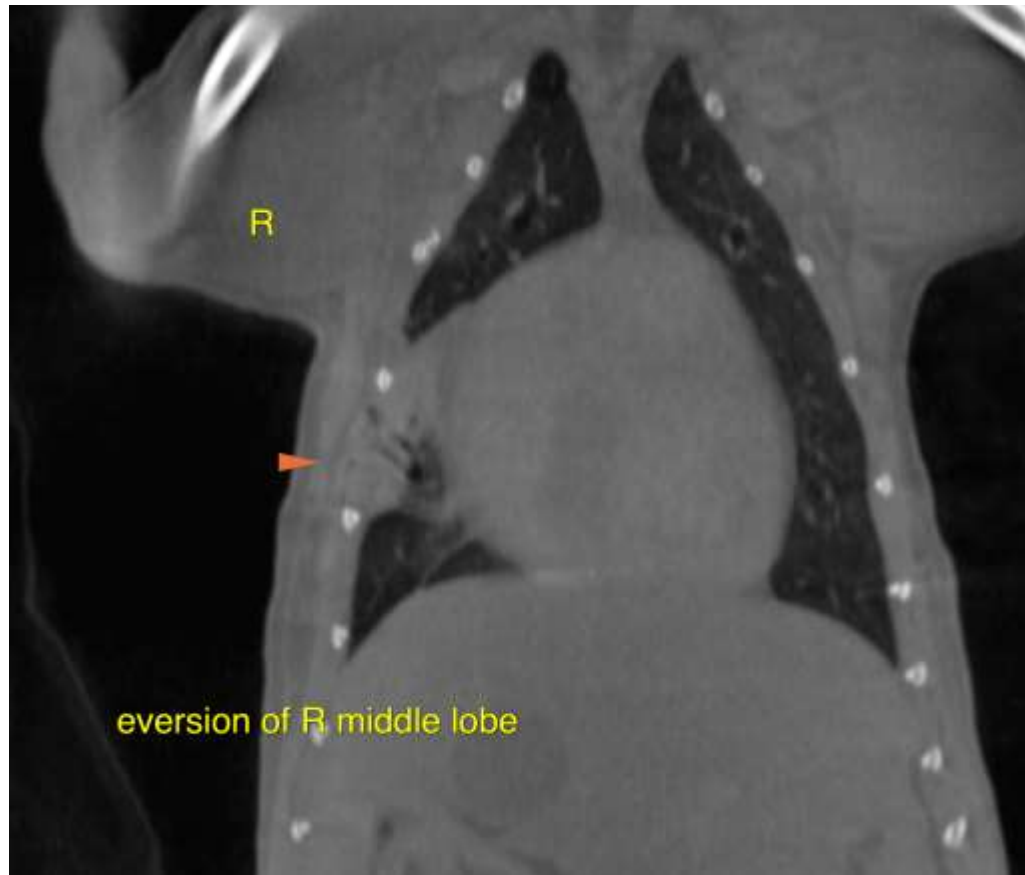
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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