



PATIENT PRESENTING CLINICAL SIGNS

Sabrina Martinez Pet presents for evaluation of dry non productive cough that usually occurs at night, lasts like 5-10 mins, goes away after client gives cough tablet. Client is concerned about pets panting. On exam - no cough elicited, no heart murmur, bcs 4/5, dental calculus. Radiology report There is a redundant

SPECIES dorsal tracheal membrane present. There is a mild diffuse bronchial pattern. There is an approximately 2.6 cm ovoid soft tissue opaque structure in the left caudal lung lobe, at the level of the left eighth rib on the VD image. The cardiovascular structures and pleural space are normal. There is mild hepatomegaly. Significant osseous abnormalities are not identified.

BREED Abnormal PE/Chem/CBC/UA Results: HCT, HB and RBC slightly high, eosinophils high (2.5 range 0.07-1.49), Phosphorus 7.4, AST and ALP slightly elevated. Creatine Kinase elevated (576)

Shih Tzu COMPUTED TOMOGRAPHY OF THE THORAX

SEX Pre/post contrast studies provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Female Spayed The dorsal part of the left caudal lung lobe shows a peri-bronchial infiltrate surrounding a bronchus of 4th degree being not fully ventilated. These changes can be traced over a distance of approximately 1.4 cm. The bronchus appears to be filled with hypodense material accompanied with thickening of the wall. All other lung parts and sections show a mild increase of the interstitial density with mild thickening of the bronchial walls but are ventilated with close contact to the inner thoracic wall on all sides. There is no evidence of pleural thickening, fluid accumulation or free pleural gas. Focal or nodular pulmonary lesions are not noted.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. The thoracic trachea, bifurcation and esophagus present as expected. The diaphragm appears normal.

The extra-thoracic soft tissues, thoracic spine as well as ribs and sternum are unremarkable. There is no evidence of bony lysis or abnormal sclerosis.

HOSPITAL NAME

Mobile Pet Imaging

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Partially obliterated bronchus dorsal part of the left caudal lung lobe with bronchial wall thickening and peri-bronchial infiltrates
- Mild broncho-interstitial lung pattern

REFERRING VET

Villasmil

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE The lesion of the described bronchus likely is a reactive-inflammatory issue and not suspicious for neoplasia. The partial obliteration is an indirect sign for foreign material which is my main concern and a potential differential. Early abscess formation is possible.

59731

DATE

8-16-23



PATIENT Sabina Martinez
The increase of interstitial lung density and bronchial wall thickening speak for an inflammatory process such as bronchitis/mild bronchopneumonia as seen with infectious disease or allergic issues but could be secondary findings in this case. Nodular changes are not recognized.

Next diagnostic steps could be endoscopy with BAL for cytology and microbiological testing.

SPECIES

Canine

BREED

Shih Tzu

SEX

Female Spayed

AGE

6 Years

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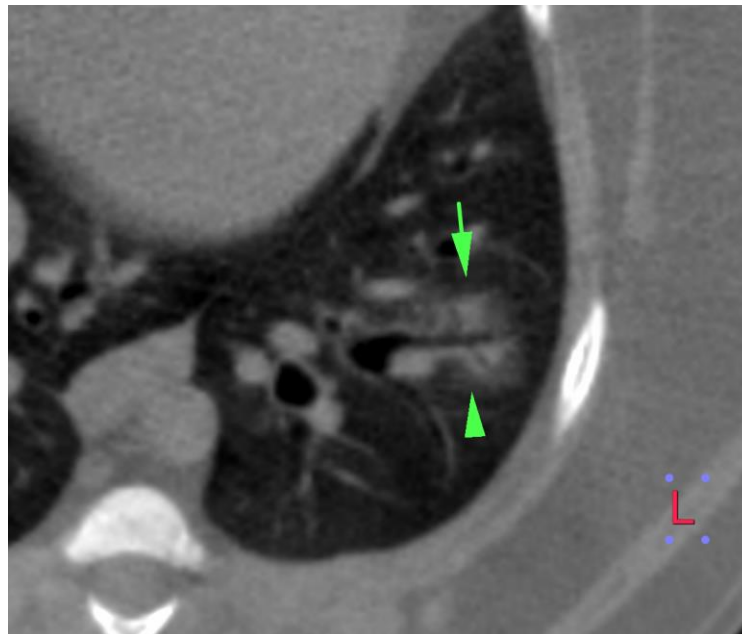
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PATIENT

Sabina Martinez

SPECIES

Canine

BREED

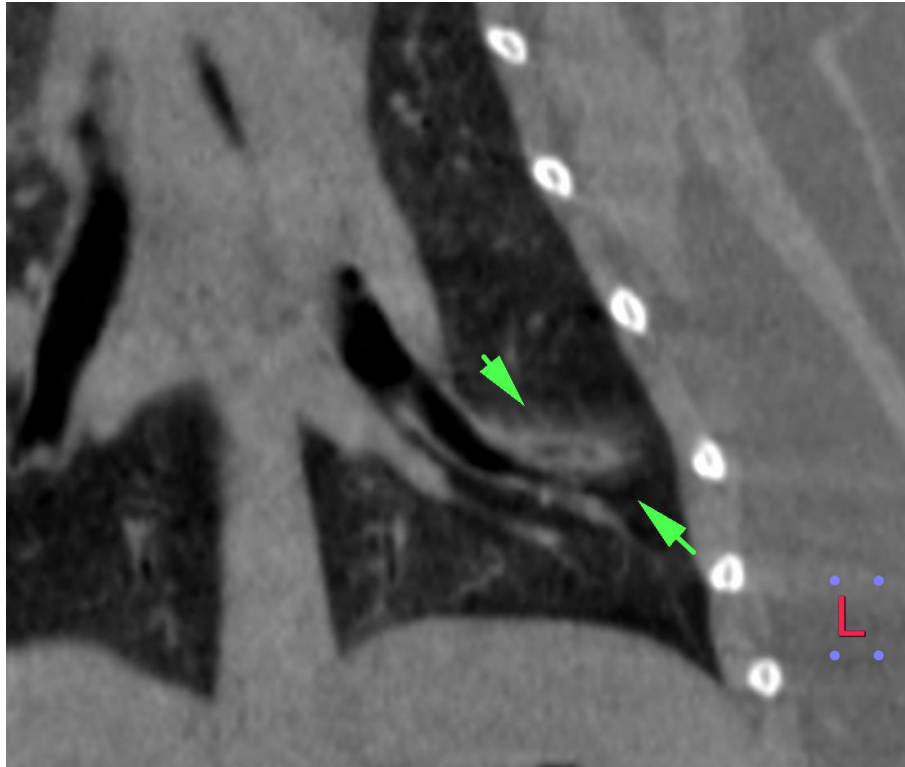
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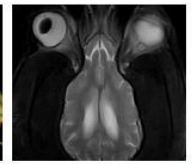
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**PATIENT**

Sabina Martinez

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.

SPECIES

Canine

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com

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