



PATIENT PRESENTING CLINICAL SIGNS

Woodhouse Raju Labored breathing and cough since November/December 2021. Diffuse pulmonary infiltrate. Hasn't responded to Prednisone or Fluconazole.

SPECIES COMPUTED TOMOGRAPHY OF THE THORAX

Canine A high resolution pre- and post-contrast CT study of the thorax is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

BREED There are moderate motion artefacts seen throughout the lung.

Bichon Frise The bony and surrounding soft tissue structures are within normal limits.

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

MN Multifocal throughout the lung parenchyma, variable sized, well-defined soft tissue attenuating nodular lesions are visible. In the periphery of the lung lobes, the nodules are partially coalescing. In the ventral aspect of the right caudal lung lobe, a mass, measuring 3.6 cm in size with mild central mineralization is visible. The tracheobronchial lymph nodes are moderately enlarged, and the middle tracheobronchial lymph node presents with granular mineralization.

AGE

8 Years Along the course of the caudal intrathoracic segment of the esophagus – starting at the caudal aspect of the carina and extending caudally up to the esophageal hiatus of the diaphragm, an ovoid shaped soft tissue mass is visible, with mild amorphous mineralization. The mass is measuring approximately 4.0 x 3.0 x 6.5 cm in size and presents a shaped concave medial border following the course of the caudal mediastinum at the same level.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

HOSPITAL NAME

Mountain West
Veterinary Hospital

- Structured nodular interstitial lung pattern
- Suspect soft tissue mass medial aspect left caudal lung lobe versus eccentrically growing mural esophageal mass
- Soft tissue mass ventral aspect right caudal lung lobe
- Lymphadenopathy tracheobronchial lymph nodes with dystrophic mineralization

REFERRING VET

Melanie Thompson

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

49506

Unfortunately, there are moderate motion artefacts, limiting the diagnostic value. The mass along the course of the intrathoracic esophageal segment likely represents a pulmonary mass – due to the sharp medial margins with a concave contour – however an esophageal is a consideration as well (e.g. carcinoma). Esophagoscopy can be used as advanced diagnostic test to rule in/out mural esophageal lesion.

DATE

1-12-22

The structured nodular lung pattern with the pulmonary masses is concerning for neoplastic transformation – such as bronchogenic carcinoma – with metastatic spread to the regional lymph nodes. Although granulomatous lung disease is a plausible differential – mycotic (e.g. Histoplasmosis, Blastomycosis) or Mycobacterium infection.

Recommend ultrasound guided FNA sampling of the consolidated peripheral pulmonary lesions



PATIENT

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as well as bronchoscopy including BAL as advanced diagnostic tests. If results are equivocal, pulmonary biopsy can be used as a more invasive diagnostic tool.

SPECIES

Canine

BREED

Bichon Frise

SEX

MN

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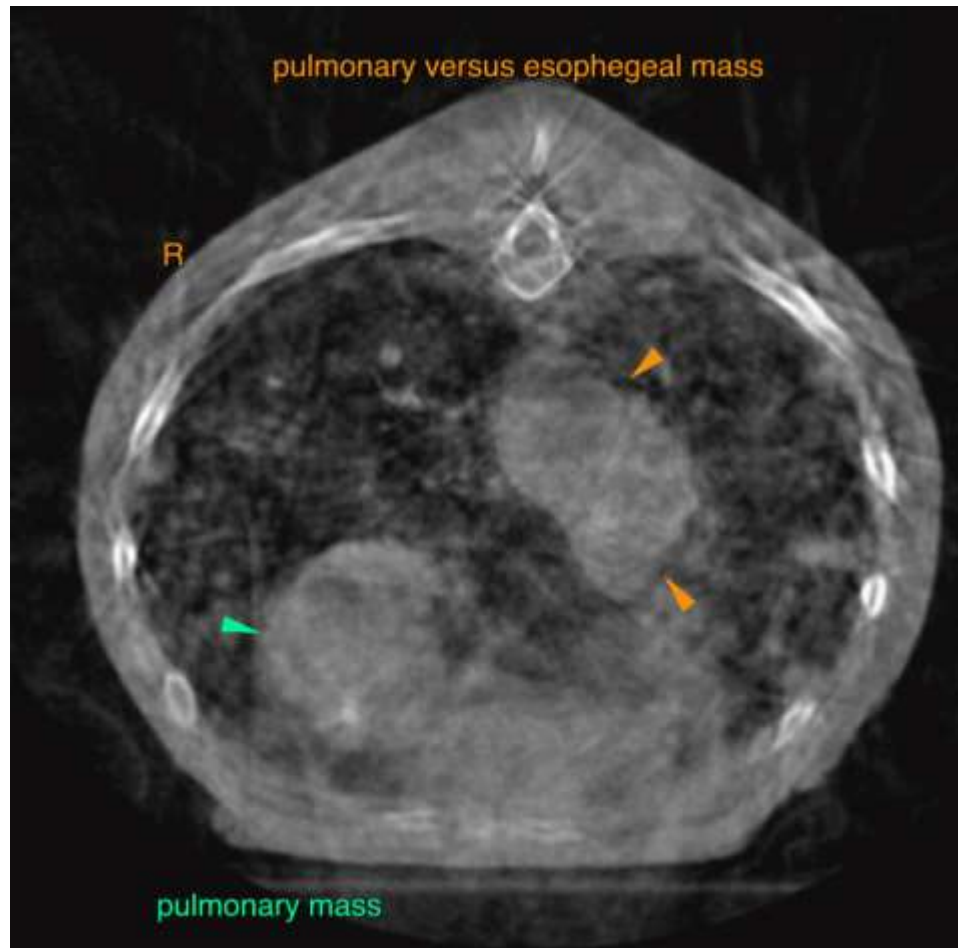
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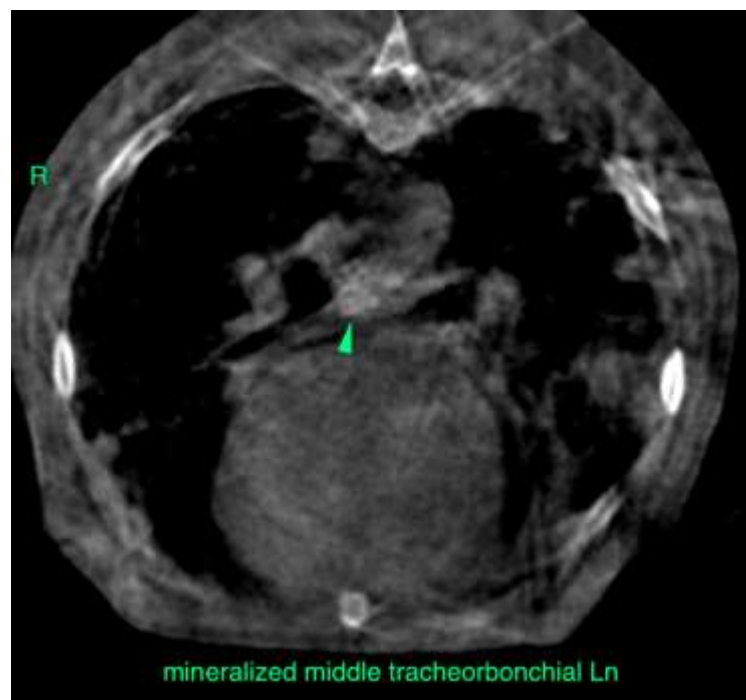
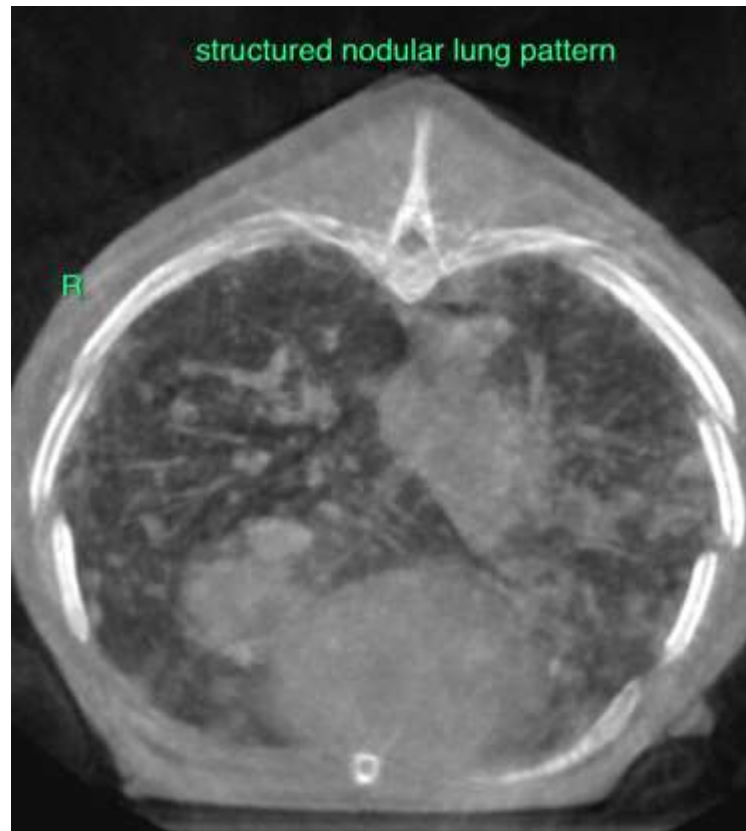
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SPECIES

Canine

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.

BREED

Bichon Frise

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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