

PATIENT

Mitzi Poole

SPECIES

Canine

BREED

English Springer
Spaniel

SEX

Female Spayed

AGE

13Y

WEIGHT

23kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Olivia Jarvis

HOSPITAL NAME

Animal Trust -
Ellesmere Port

REFERRING VET

Janet Mitchell

INVOICE

73435

DATE

1-22-26

PRESENTING CLINICAL SIGNS

History:

- presented for echo as inc cough, was just at night now all day and sig dec in exercise tolerance.
- Grade 4/6 apical LHS HM
- conscious echo performed
- M Mode; ISDd 1.47; LVd 3.33; LVFWd 1.27; IVSs 1.98; LVs 1.78; LVFWs 1.25; AO- 2.22; LA- 3.69; la/ao 1.67; LVDDN 1.61
- ddx- MMVD Stage C
- borderling b2, LVVID is borderling, though la/ao is inc
- suspect cardiac issue not main problem, heart dosnt seem severe enough for level of cough
- rang o to offer cardiac referral, trial heart meds or radiographs. o opted for xrays
- inflated chest views taken, lateral and DV. Mediastinal mass seen
- adv o of mass, offered ct or referral. or take home, trail heart meds and monitor until qol deteriorates.
- discussed again with os at discharge, o decided would like ct scan
- as already had ga today book in for next week, o happy with plan. o would like to see myself

Abnormal PE/Chem/CBC/UA Results: ALP 321 U/L Lymphocytes 1.03 x10⁹/L

COMPUTED TOMOGRAPHY OF THE THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

Level with the 5th to 7th left rib, a fat attenuating mass is appreciated medial to the serratus ventralis muscle.

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 is uniform and considered within normal limits.

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.

The lung parenchyma presents the expected architecture and attenuation behavior, but a small zone of consolidation of the most ventral aspect of the right cranial lung lobe – considered as dystelectasis.

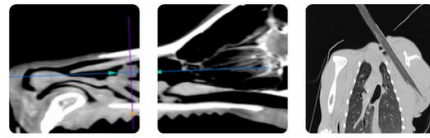
Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Submuscular lipoma left thoracic wall – possibly infiltrative with the caudal aspect of the left serratus ventralis muscle

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study of the thorax reveals no evidence of an intrathoracic mass; there is no evidence of a mediastinal nor pulmonary mass.



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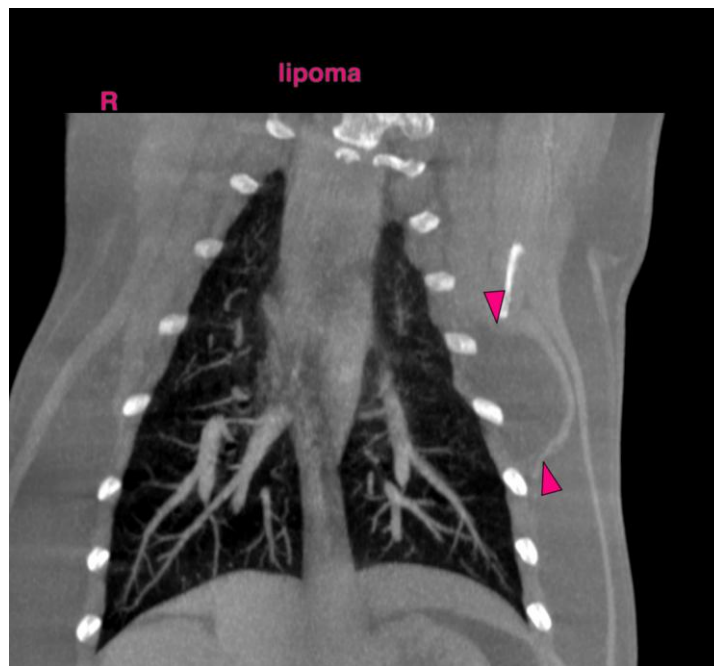
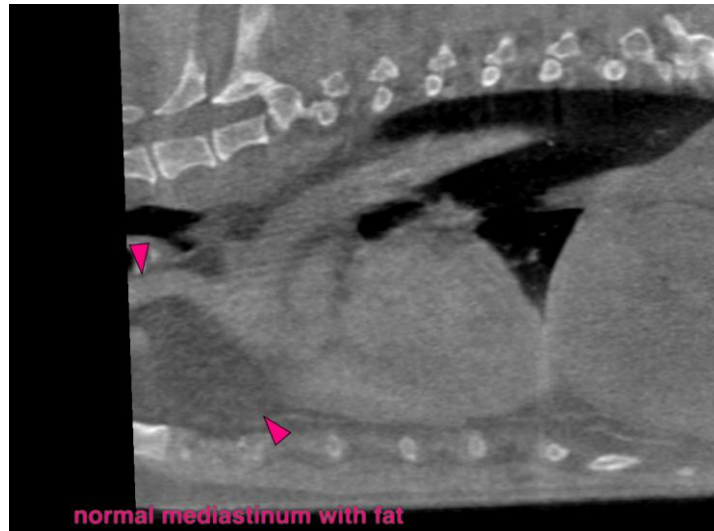
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com