



PATIENT

Sakari Hinchy

PRESENTING CLINICAL SIGNS

Mammary mass palpated recently, cytology from FNA sample consistent with probable mammary carcinoma. Thoracic rads taken for met check prior to decision about surgical mass removal. No coughing. Dog has stage B2 valve disease, on pimobendan.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX

Radiographs of the thorax in three imaging planes are provided for review.

BREED

Chinook

RADIOGRAPHIC FINDINGS

The 4th to 7th left rib present with chronic mild to moderately displaced costal fractures, partially bridged by callus

SEX

FS

The extrathoracic soft tissues present homogeneous without abnormalities.

The caudal contour of the cardiac silhouette is steep, and the caudal cardiac waist is lost. The pulmonary vasculature is within normal limits.

AGE

12 Years, 6 Months

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

HOSPITAL NAME

Blairstown Animal Hospital

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

REFERRING VET

Dr. Harker

RADIOGRAPHIC DIAGNOSIS

- Mild left sided cardiac enlargement – history of B2 mitral valve disease
- Chronic serial rib fracture 4th to 7th left rib
- No evidence of pulmonary metastatic disease

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study is negative for pulmonary metastatic disease.

DATE

1-26-22



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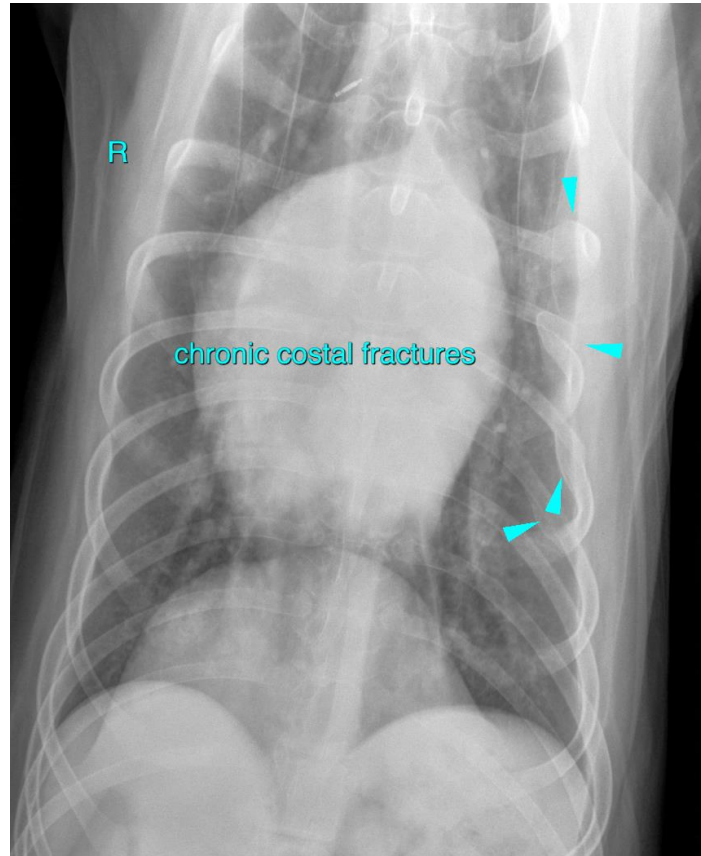
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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