



**PATIENT**

Banjo Anthony

**PRESENTING CLINICAL SIGNS**

Over 1 mo. history of slowly progressing cough and throat clearing. Has been treated with antibiotics with no help to the cough, but it did clear up a peri-ocular infection.  
 Abnormal PE/Chem/CBC/UA Results: Slightly pale gums, Mild dehydration, Left upper eyelid adenoma, Left eye with swelling below it, including a boney change in the zygomatic arch, tender mid back and mild loss of proprioception in rear limbs, Stage III dental disease, multiple subcutaneous masses.

**SPECIES**

Canine

**BREED**

Labrador Retriever  
 Mix

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**RADIOGRAPHIC FINDINGS**

The vertebral endplates T5/T6 present moderate spondylosis formation.

The extrathoracic soft tissues present homogeneous without abnormalities.

**SEX**

Neutered Male

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

**AGE**

12 Years, 9 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.

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

**INTERPRETED BY**

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

In the left caudal lung lobe and the right cranial lung lobe, a well-defined, uniform soft tissue opaque mass is seen respectively. The mass in the left caudal lung lobe is extending over 5 intercostal space and the mass in the right cranial lung lobe is occupying approximately 2 intercostal space. There appears to be a second roundish soft tissue nodule visible in the right lateral projection, superimposing on the cranioventral aspect of the left caudal pulmonary mass.

**HOSPITAL NAME**

Elizabeth Animal  
 Hospital

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

**RADIOGRAPHIC DIAGNOSIS**

- Pulmonary soft tissue masses – right cranial lung lobe and left caudal lung lobe
- Spondylosis deformans T5/T6

**REFERRING VET**

Leon Anderson, DVM

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The pulmonary masses are consistent with primary pulmonary neoplasia, such as bronchogenic carcinoma. Theoretically granulomatous lung disease (e.g. eosinophilic granulomatosis) is a differential. (Ultrasound guided) FNA sampling of the pulmonary mass by the 7<sup>th</sup>/8<sup>th</sup> left intercostal space can be performed for further definition.

**INVOICE**

56447

**DATE**

1-30-23



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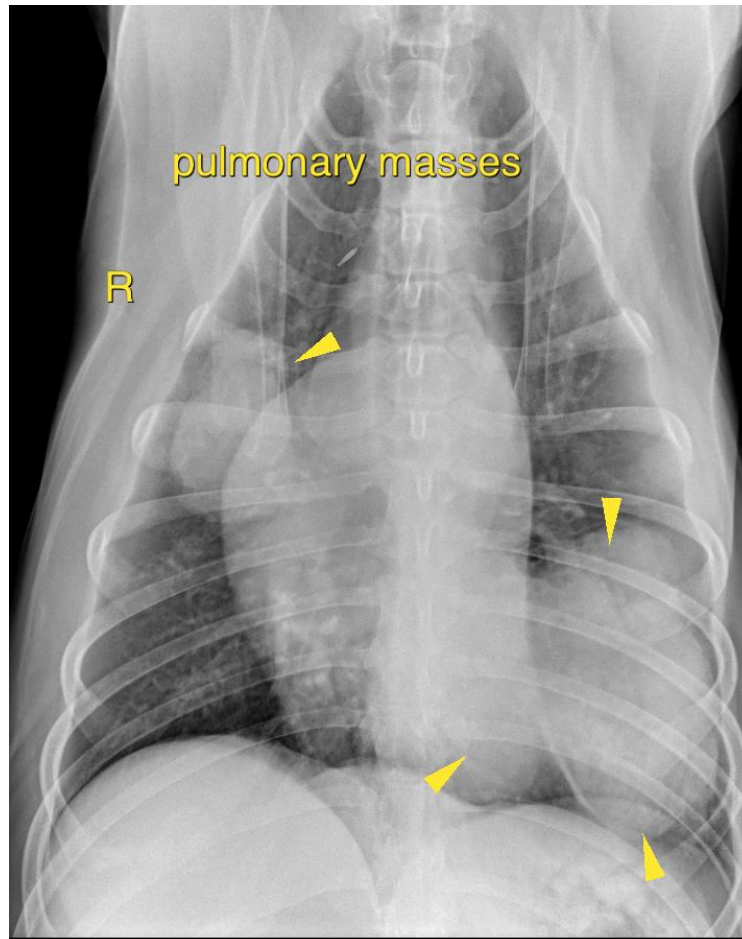
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
sebast.schaub@gmail.com