



PATIENT PRESENTING CLINICAL SIGNS

Mori Lam History: Older canine with coughing of 4 week duration. Eosinophilia on blood work. Baerman negative. Previous nasal discharge - improved. Intermittent stertor. Mild change in bark. Marked mucoid discharge in airways on bronchoscopy. Bronchiectasis and bronchomalacia seen. Suspicious for eosinophilic bronchopneumopathy. Bronchoscopy and BAL performed after CT.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL & THORAX

BREED

Samoyed

A pre- and post-contrast CT study of the skull and a post-contrast CT study of the thorax are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Skull

Neutered Male

Triadan 408 is absent. Triadan 209 presents a marked widening of the periodontal space.

AGE

11 Years

In both nasal cavities, a moderate amount of fluid attenuating material is attached to the nasal mucosal lining, L>R. Bilateral mild atrophy of the nasal conchal structures is appreciated.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

Both tympanic bullae are filled with non-contrast enhancing soft tissue attenuating material. The osseous lining of the tympanic bullae bilaterally is smooth and thin. The external ear canals are within normal limits.

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The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

REFERRING VET

Thorax

Dr. Ashley Gold

Multifocal mild spondylosis formation is seen along the thoracic spine. The periarticular bones of both shoulder joints present moderate osteophyte new bone formation. Multifocal mild spondylosis formation is seen along the thoracic spine.

INVOICE

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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.

DATE

10/27/22



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

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The most ventral dependent aspects of the lung parenchyma present multiple regions with consolidation of the lung parenchyma and predominantly the ventral segments of the bronchial tree present moderate smooth thickening of the walls. Multiple segments of the ventral bronchial segments are filled with fluid attenuating material. Generalized mild tubular widening of the distal bronchial segments is appreciated.

BREED

Samoyed

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

SEX

Neutered Male

- Ventrally distributed alveolar pattern and bronchial wall thickening with exudate within multiple bronchial segments
- Mild destructive rhinitis
- Mild bronchiectasis
- Advanced periodontal disease 209
- Bilateral otitis media
- Degenerative osteoarthritis shoulder joints bilaterally

AGE

11 Years

COMPUTED TOMOGRAPHIC DIAGNOSIS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The lung pattern is indicating active bronchopneumonia, underlying immune mediated airway disease such as eosinophilic bronchopneumopathy and non-specific rhinitis (e.g. eosinophilic) with bacterial superinfection is a consideration here. As there are small regions of ground glass attenuation in the caudodorsal aspect of the caudal lung lobes, testing for lung worm infection is recommended as well. Bronchoscopy including BAL has already been performed for further definition. There are no signs for neoplasia or aspirated foreign material.

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Consider extraction of triadan 209.

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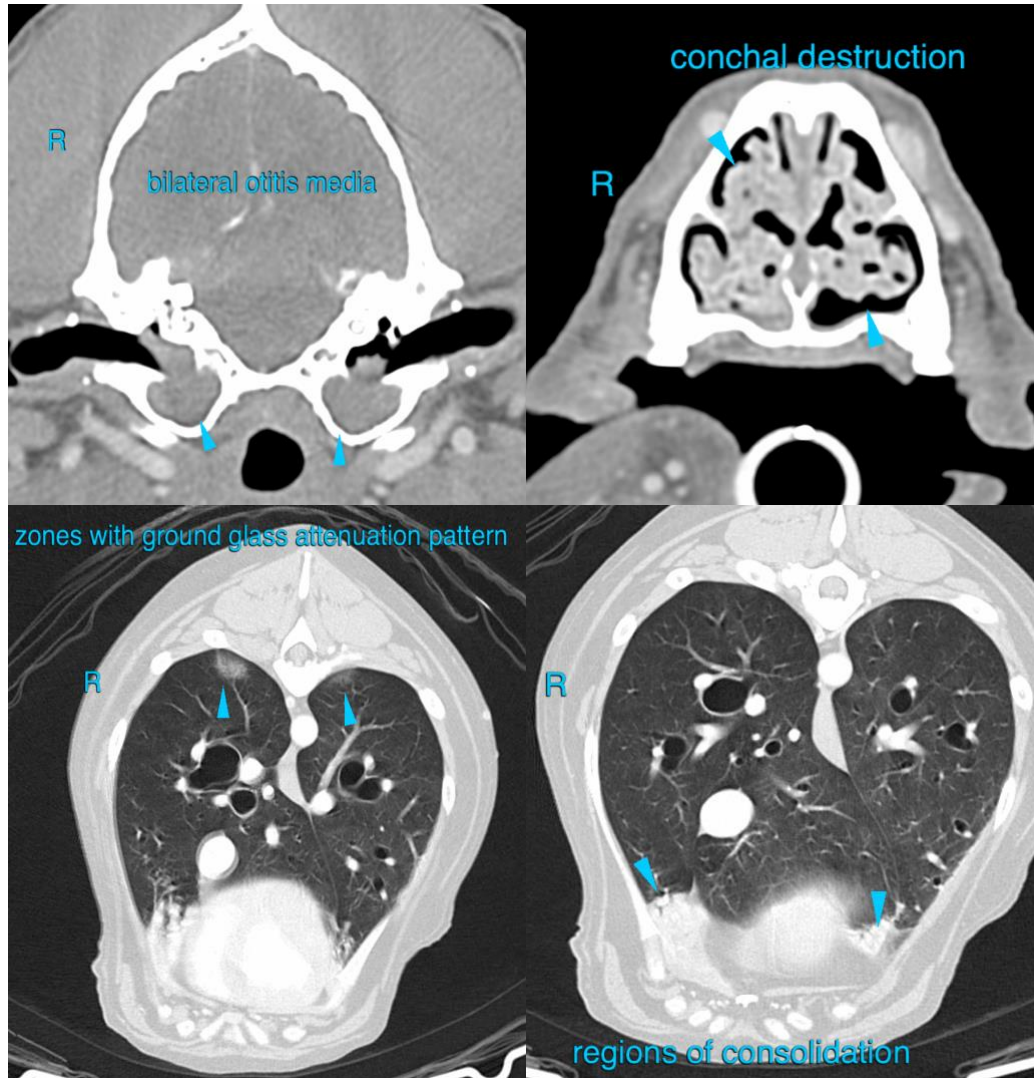
Dr. Ashley Gold

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PATIENT

Mori Lam

SPECIES

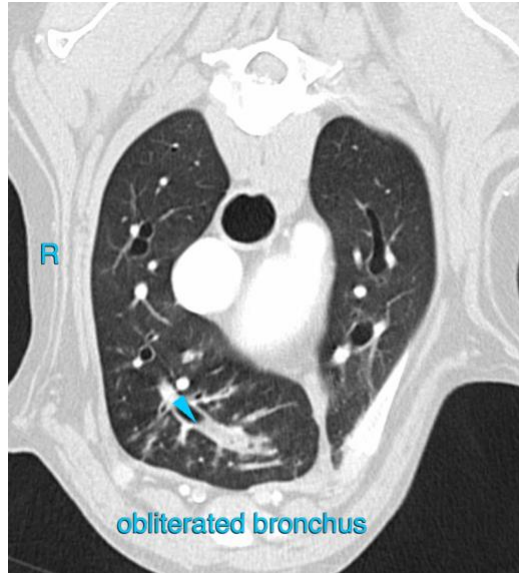
Canine

BREED

Samoyed

SEX

Neutered Male



AGE

11 Years

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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