



PATIENT

Bullet Huey

SPECIES

Canine

BREED

Doberman

SEX

MN

AGE

12 Years, 3 Months

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Gentle Doctor Animal
Hospital

REFERRING VET

Dr. A Taplett

INVOICE

54479

DATE

10-5-22

PRESENTING CLINICAL SIGNS

Owner reports bark is hoarse for last year and coughing in the morning. History of soft tissue sarcomas and concern for Wobblers. History of elevated liver enzymes with normal bile acids. Abnormal PE/Chem/CBC/UA Results: Down in weight 10lbs in 6 months. Several new growths noted on exam, regrowth of suspect soft tissue sarcoma. Heart and lung sounds unremarkable.

RADIOGRAPHIC STUDY OF THE NECK AND THORAX

A complete set of radiographs of the neck and thorax is provided for review.

RADIOGRAPHIC FINDINGS

Neck

Multifocal spondylosis formation is seen along the cervical spine. The facet joints of the cervical spine present moderate osteophyte new bone formation.

The soft tissue structures of the neck present without abnormalities.

Thorax

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

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.

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.

Best seen in the left lateral projection of the thorax, a well-defined, ovoid shaped homogeneous soft tissue opaque structures is superimposed on the base of the heart, measuring approximately 1.5 intercostal spaces in size. In the VD view, the mass is not clearly appreciated but appears to be superimposed on the right aspect of the heart.

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

RADIOGRAPHIC DIAGNOSIS

- Pulmonary mass, suspect dorsal aspect right middle lung lobe
- Spondylosis deformans cervical spine
- Spondylarthrosis cervical spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pulmonary mass can present pulmonary metastatic disease (history of sarcoma) or primary pulmonary neoplasia (e.g. carcinoma). Granuloma or pulmonary cyst are a potentials as well but considered less likely. The finding is a plausible source for cough.



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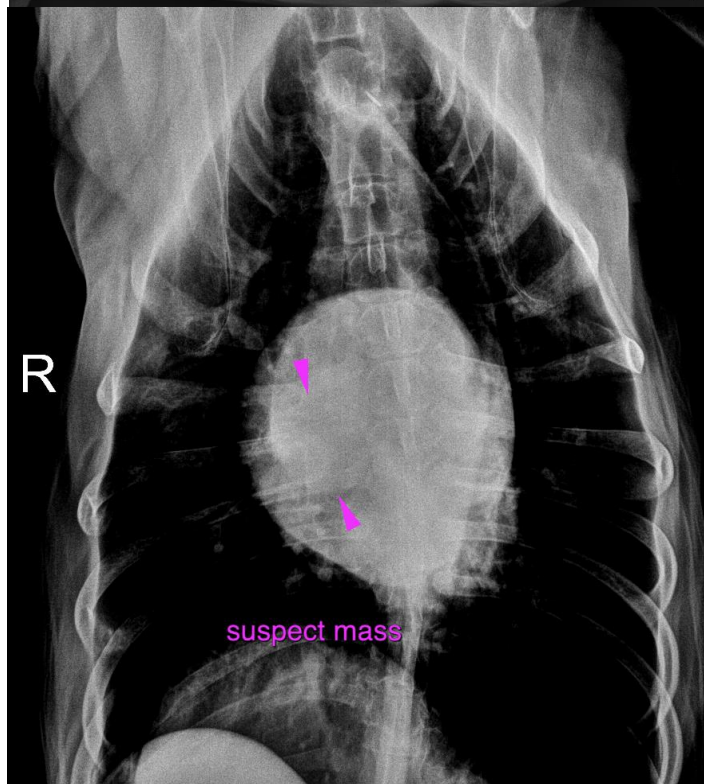
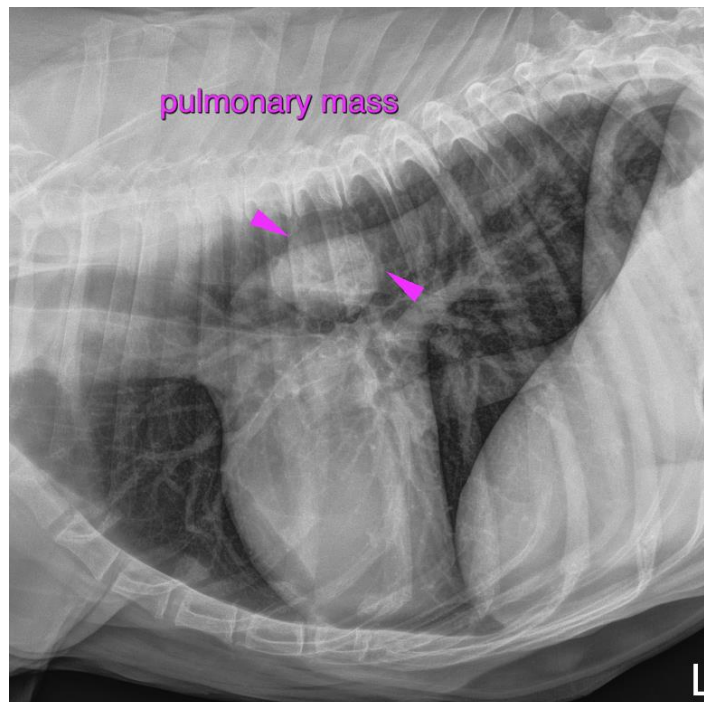
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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