
PATIENT PRESENTING CLINICAL SIGNS

Gabby Williamson Patient has been "ADR" for the past month. Not eating as well, weak, lethargic. No vomiting, some soft stool. Also noting reluctance to go up and down stairs at home. No coughing or sneezing.
 Abnormal PE/Chem/CBC/UA Results: PE: Weight loss of 4 pounds in 2 weeks, temperature 103.1.
SPECIES Weakness in hind limbs with mild ataxia. Normal cardiac auscultation. Panting heavily during auscultation of lungs. Abdominal ultrasound: no structural lesions. CBC/Chem: Neutropenia at 3600 taken 4 weeks ago. Urinalysis: USG 1.048, pH 7.0, trace ketones, 2+ protein, 1-3 WBC/hpf, 0-3 RBC/hpf, 2+ cocci, rare rods. Urine culture: pending. Started on gabapentin. Holding on antibiotics for possible UTI due to asymptomatic patient.

BREED RADIOGRAPHIC STUDY OF THE THORAX

Wheaton Radiographs of the thorax in three imaging planes are provided for review. Radiographs are provided in JPEG file format.

SEX RADIOGRAPHIC FINDINGS

Spayed Female The surrounding bony structures are within normal limits.

AGE

9 Years 10 Months 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.

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 right cranial lung lobe is consolidated presenting homogeneous soft tissue opacity and a moderately increased volume. The most proximal segment of the bronchus of the right cranial lung lobe is appreciated and tapers in its course cranially, presenting in the caudal third of the right cranial lung lobe. The right middle lung lobe is distorted and displaced caudally by the mass effect.

HOSPITAL NAME

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

RADIOGRAPHIC DIAGNOSIS

REFERRING VET
 Dr. Taylor Morrison

- Consolidated right cranial lung lobe with increased volume and bronchial compression

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE
 30079

The findings are most consistent with neoplastic transformation of the right cranial lung lobe – the bronchial compression is supporting diagnosis of cellular proliferation of the surrounding lung parenchyma – such as bronchogenic carcinoma, round cell tumor. Theoretically eosinophilic granulomatosis can cause consolidation of the lung as well, but I would expect accompanying bronchial pattern of the remaining lung lobes. Recommend FNA sampling by the 3rd/4th right intercostal space to confirm the diagnosis. CT might be used for surgical planning, if applicable.

DATE
 11/23/21



PATIENT

Gabby Williamson

SPECIES

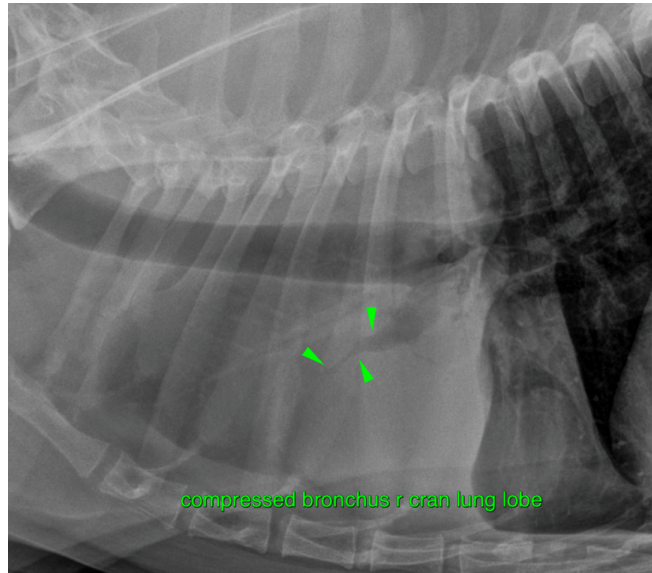
Canine

BREED

Wheaton

SEX

Spayed Female



AGE

9 Years 10 Months

INTERPRETED BY

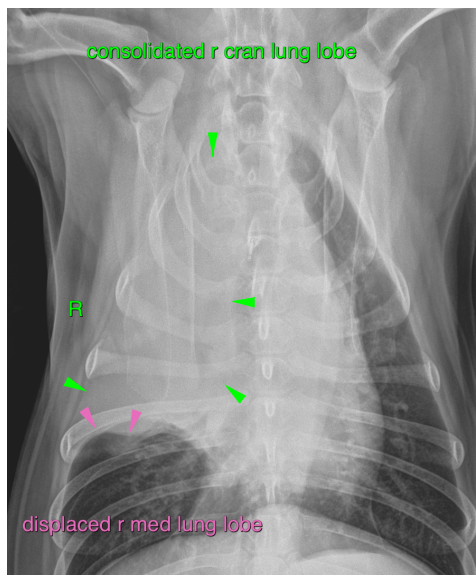
Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

HOSPITAL NAME

Gentle Doctor AH

REFERRING VET

Dr. Taylor Morrison



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

INVOICE

30079

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.

DATE

11/23/21

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