



PATIENT

PRESENTING CLINICAL SIGNS

Apollonia Lombardo

Presented for a chronic cough (several years) which has improved slightly on medication but recently has gotten worse Hacks up phlegm and sneezes uncontrollably.
Abnormal PE/Chem/CBC/UA Results: Normal

SPECIES

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

Canine

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

BREED

COMPUTED TOMOGRAPHIC FINDINGS

Husky

Skull

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

SEX

In both nasal cavities, a moderate amount of soft tissue material is attached to a thickened nasal mucosal lining.

FS

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

AGE

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

5

INTERPRETED BY

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.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Thorax

Northeast Veterinary
Referral Hospital

The bony and surrounding soft tissue structures are within normal limits.

The tracheobronchial lymph nodes are mildly prominent.

REFERRING VET

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

Dr. Runde

Generalized moderate thickening of the bronchial walls is appreciated. There is multifocal cylindrical dilation of the bronchi.

INVOICE

The lung parenchyma presents the expected architecture and attenuation behavior.

55447

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

11-30-22

- Bronchial lung pattern
- Multifocal mild cylindrical bronchiectasis
- Mild lymphadenopathy tracheobronchial lymph nodes
- Rhinitis



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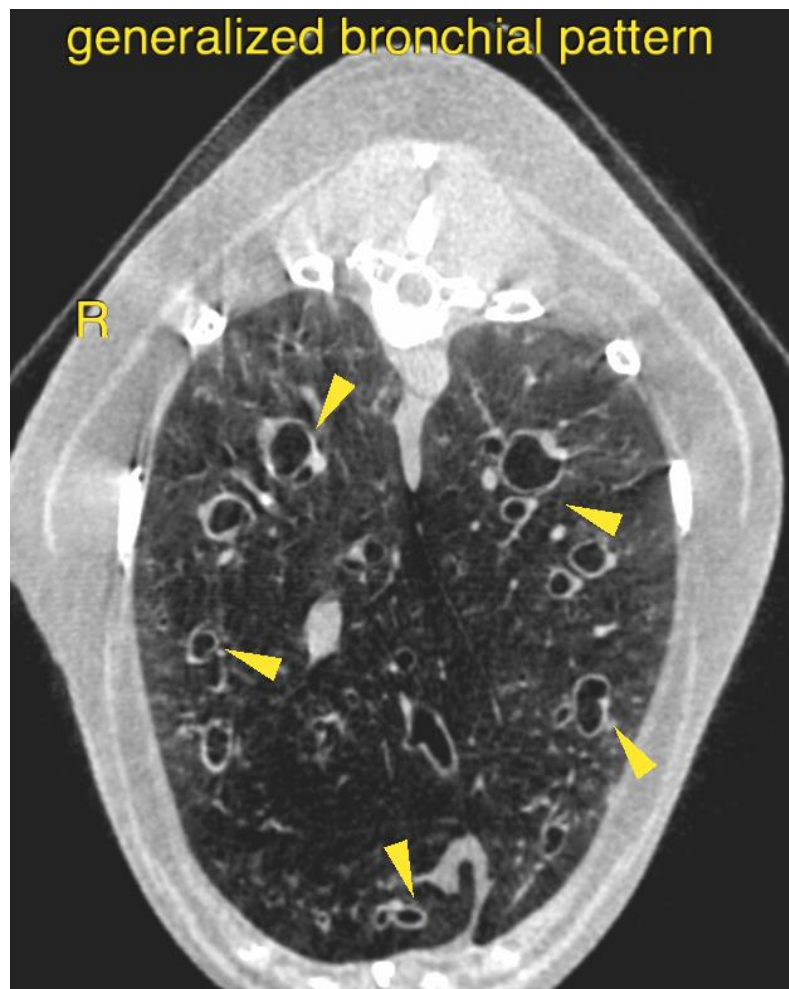
11-30-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bronchial lung pattern in combination with the chronic cough is suggestive for primary inflammatory bronchitis – such as eosinophilic bronchopneumopathy with secondary mild hyperplasia of the tributary lymph nodes. Possible superinfection might have deteriorated clinical signs. The bronchiectasis is considered as a sequela to the chronicity of clinical signs.

The rhinitis can present accompanying non-specific (immune mediated) rhinitis.

Bronchoscopy including BAL would be ideal as advanced diagnostic tool and might be complementing by rhinoscopy including biopsy.





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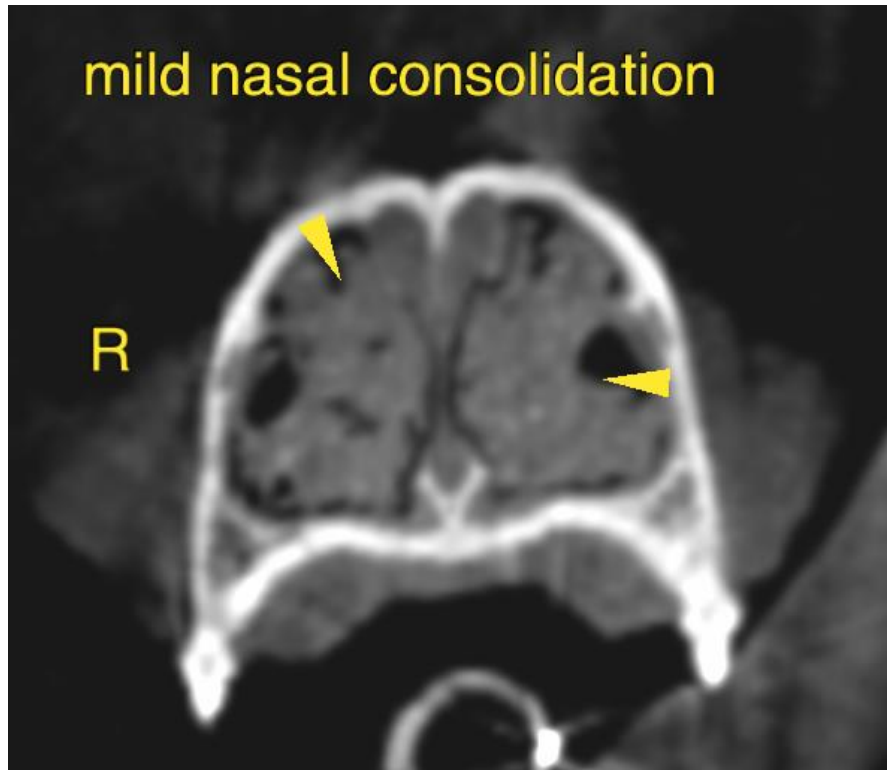
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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