



**PATIENT**

Teddy Chorak

**PRESENTING CLINICAL SIGNS**

Prev episode on 10/30 notes: FAST SCAN: pericardial effusion, tamponade, halo around GB , stomach large and distended with gas Pericardiocentesis: 400 ml of blood recovered, runs of VPCs, 2.5 mls lidocaine administered, scant fluid remaining. CBC: HCT 48.7%, RBC 7.05 M/uL, WBC 27.8 k/uL, neu 24 k/uL, mono 1.97 k/uL Chem 10: glu 182 mg/dL, ALT 417 EPOC: Ca+ 1.09 mmol/L, Cl- 100 mmol/L, crea 1.53 mg/dL, Glu 208 mg/dL, K+3.2 mmol/L, Na+138 mmol/L, Lac 14.19 mmol/L, pH 7.34, BE -5.3 Echo performed by EK, submitted to Cardiologist, no obvious cancer, see full report . Recommend CT and recheck coags if effuses again Cytology of fluid - hemorrhagic exudate.

**SPECIES**

Canine

**BREED**

Labrador Retriever

Abnormal PE/Chem/CBC/UA Results: FAST on presentation - mild pericardial effusion and abdominal effusion EPOC - lac 1.9, hct 39 CBC - neut 18k, plt 198, hct 41

**COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

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

**SEX**

Male Neutered

**COMPUTED TOMOGRAPHIC FINDINGS**

Thorax

**AGE**

3.5

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

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

A mild amount of gravity dependent, non-contrast enhancing soft tissue material is visible in the pleural cavity. The lung lobes are mildly retracted from the thoracic wall and pleural fissure lines are visible.

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.

**HOSPITAL NAME**

Wilvet Salem

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

**REFERRING VET**

Dr. Emi Menzen

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

**INVOICE**

48950

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

Abdomen

**DATE**

12-12-21

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.



**PATIENT**

Teddy Chorak

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**SPECIES**

Canine

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**BREED**

Labrador Retriever

The bony and surrounding soft tissue structures reveal no abnormalities.

**SEX**

Male Neutered

- Mild pleural effusion
- Normal abdomen

**AGE**

3.5

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mild pleural effusion can be a sequela to preceding pericardiocentesis. The CT study presents without abnormalities, explaining pericardial effusion. However, evaluation of the heart only – especially for intracardiac lesions – by CT is limited due to inherent continuous motion of the heart. Recommend complementing full workup by a cardiac echo.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Wilvet Salem

**REFERRING VET**

Dr. Emi Menzen

**INVOICE**

48950

**DATE**

12-12-21



**PATIENT**

Teddy Chorak

**SPECIES**

Canine

**BREED**

Labrador Retriever

**SEX**

Male Neutered

**AGE**

3.5

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Wilvet Salem

**REFERRING VET**

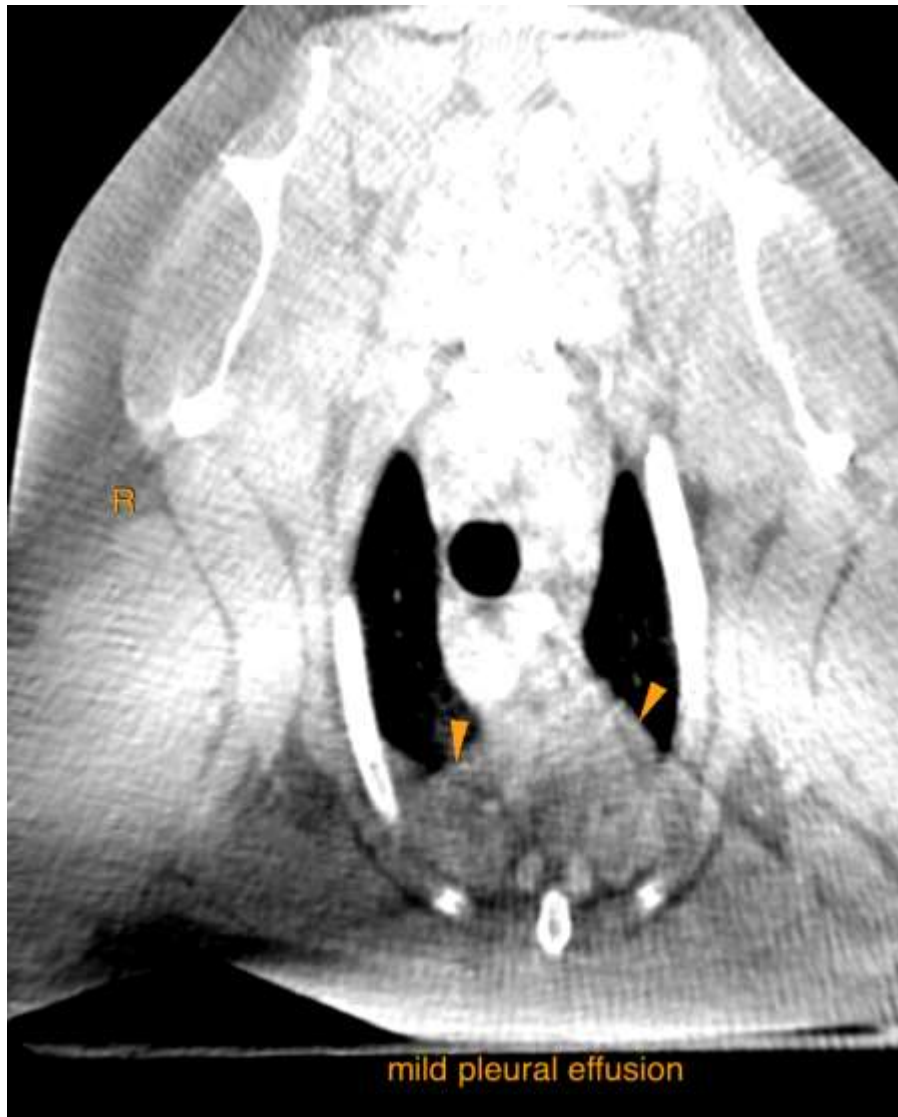
Dr. Emi Menzen

**INVOICE**

48950

**DATE**

12-12-21



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.

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