



**PATIENT PRESENTING CLINICAL SIGNS**

Rosco Kemp P diagnosed with hepatitis 5/2020, started pred therapy. Developed DM 12/2020 on pred, switched to atopica and started insulin therapy. Hepatitis seems well-controlled with atopica, DM has been challenging to control- p most often reads high on at-home interstitial reader, but with attempts to increase insulin dose p goes hypoglycemic. P has had several episodes in the past year of DKA, always corresponding to when o is out of town. P has had several episodes of gastroenteritis recently possibly attributable to swallowing too-large pieces of bully stick treats. Recent u/as also show increasing proteinuric. P's symptoms are well-managed, but BG readings still tend towards the high side. Recc AUS scan primarily to assess size of adrenal glands (Cushings??), also as a general scan. Abnormal PE/Chem/CBC/UA Results: most recent cbc/chem @ AEC 10/10/22: CBC WNL, chem- BG high 188, glob high 5.2, ALT high 333, ALP high 311 most recent u/a @ AEC 10/10/22: USG 1.032, pH 7, hematuria with no pyuria or bacteria most recent UPC @ Northshore 08/03/22 was 2.5; prev 5/12/22 was 1.9 9) Treatments to date: 10) Medications/ Dosages: vetsulin: 20U SC BID, o adjusts down if BG reading is low on Freestyle cyclosporine: 150 mg PO SID ursodiol: 500 mg PO SID denamarin: large dog PO SID adequan: 1.4 mL SC monthly

**SPECIES**

Canine

**BREED**

Lab Mix

**SEX**

MN

**RADIOGRAPHIC STUDY OF THE THORAX**

Radiographs of the thorax in three imaging planes are provided for review.

**AGE**

14 Years

**RADIOGRAPHIC FINDINGS**

Multifocal mild spondylosis formation is seen along the thoracic spine.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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.

**HOSPITAL NAME**

Northshore  
Veterinary Hospital

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.

**REFERRING VET**

Brita Kiffney

In the mid third of the right middle lung lobe, an irregular marginated region of pulmonary consolidation is appreciated, measuring approximately 2 intercostal spaces in size. Multifocal punctuate mineralization of the pulmonary parenchyma is appreciated.

Throughout the left lung lobes, multiple well-defined, roundish gas filled lesions, demarcated by a thin, soft tissue capsule are appreciated.

**INVOICE**

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

**DATE**

12-14-22

**RADIOGRAPHIC DIAGNOSIS**

- Irregular roundish zone of pulmonary consolidation right middle lung lobe – stationary in size in comparison to the preceding radiographic study
- Multiple pulmonary bullae
- Pulmonary osteomas
- Spondylosis deformans



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**REFERRING VET**

Brita Kiffney

**INVOICE**

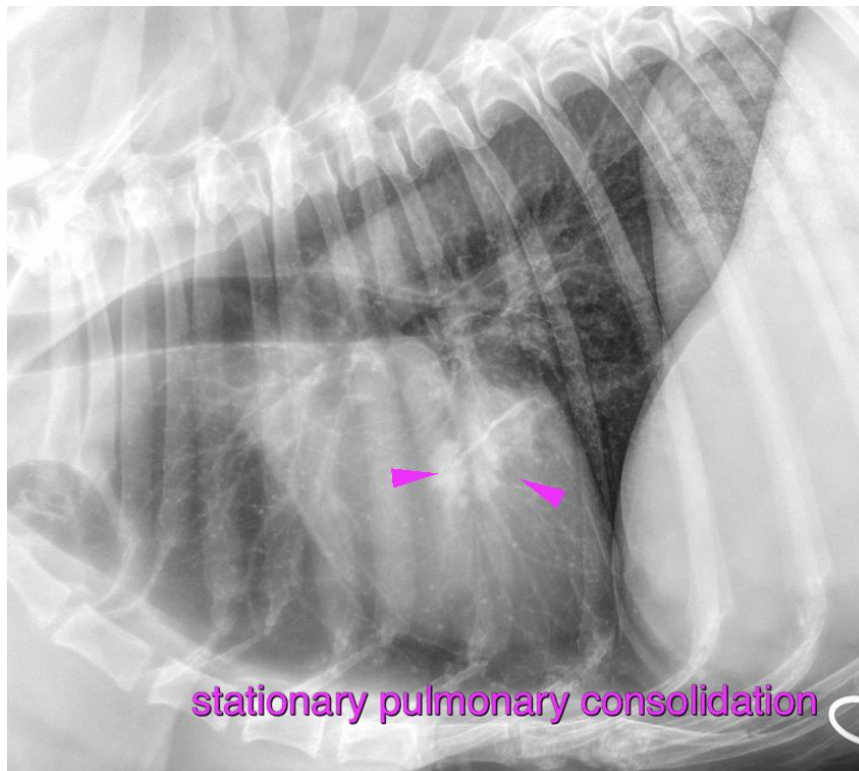
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**DATE**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The irregular roundish consolidated pulmonary lesion is stationary in size in comparison to the preceding radiographic study and pulmonary metastasis/primary pulmonary neoplasia or granuloma are considered most likely here.





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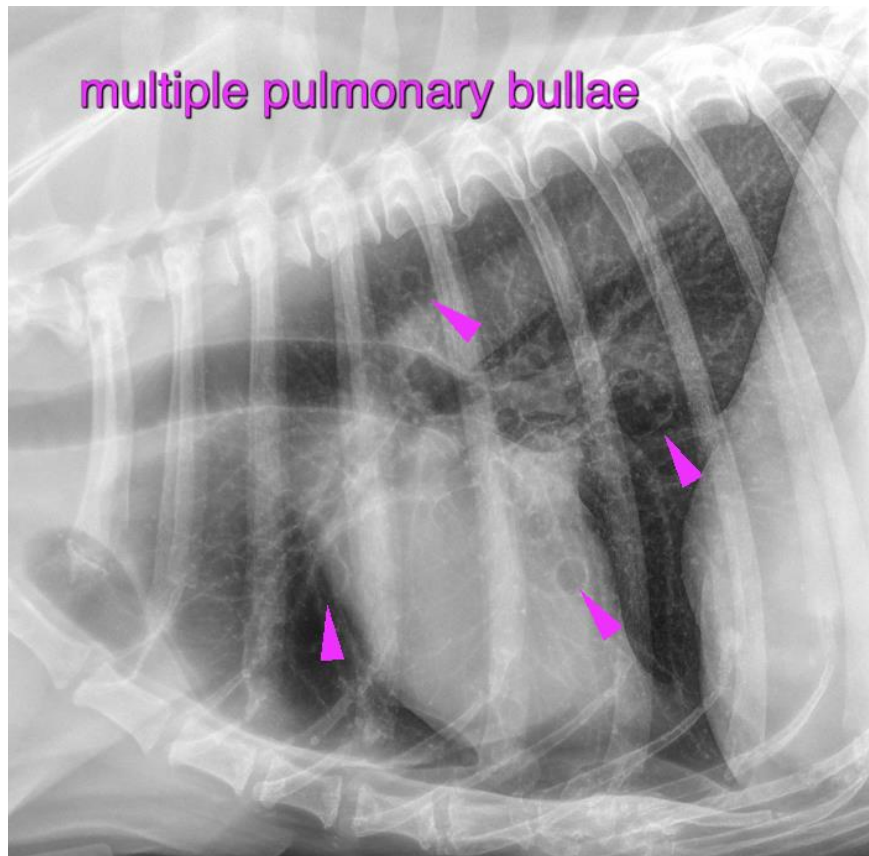
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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