

**PATIENT**

Buddy McNeil

PRESENTING CLINICAL SIGNS

History of tamponade March 2021 and currently. U/S in March and today shows no cardiac mass. Bicavitary pleural effusion. Chest tap Dec 23/21. R/O cardiac vs thoracic mass. Abnormal PE/Chem/CBC/UA Results: Increased WBC, ALT, urea, decreased CL

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE THORAX

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

BREED

Husky X

COMPUTED TOMOGRAPHIC FINDINGS

A subcutaneous lipoma is seen at the left caudoventral thoracic wall.

SEX

M

The pericardial sac is moderately distended by fluid. The cardiac volume is decreased.

The pleural cavity contains a moderate amount of gravity dependent, fluid attenuating material. The lung lobes are retracted from the thoracic wall and present a significantly reduced volume. The lung parenchyma presents multiple regions with atelectasis. The aerated parts of the lung parenchyma present with the expected architecture.

AGE

7.5 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

COMPUTED TOMOGRAPHIC DIAGNOSIS**HOSPITAL NAME**

Bridgwater
Veterinary Hospital
and Wellness Centre

- Significant pericardial effusion with secondary pericardial tamponade
- Moderate pleural effusion
- Secondary dystelectasis of the lung
- Lipoma left caudoventral thoracic wall

REFERRING VET

Dr. K. Choptain

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pericardial effusion with secondary pericardial tamponade can be a source for the pleural effusion. No underlying cause for the pericardial effusion or other source for the pleural effusion can be appreciated. However, evaluation of the heart by CT is limited and complementing workup by a cardiac echo is strongly recommended. A complete fluid analysis of the pericardial and pleural effusion should be considered.

INVOICE

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12-26-21



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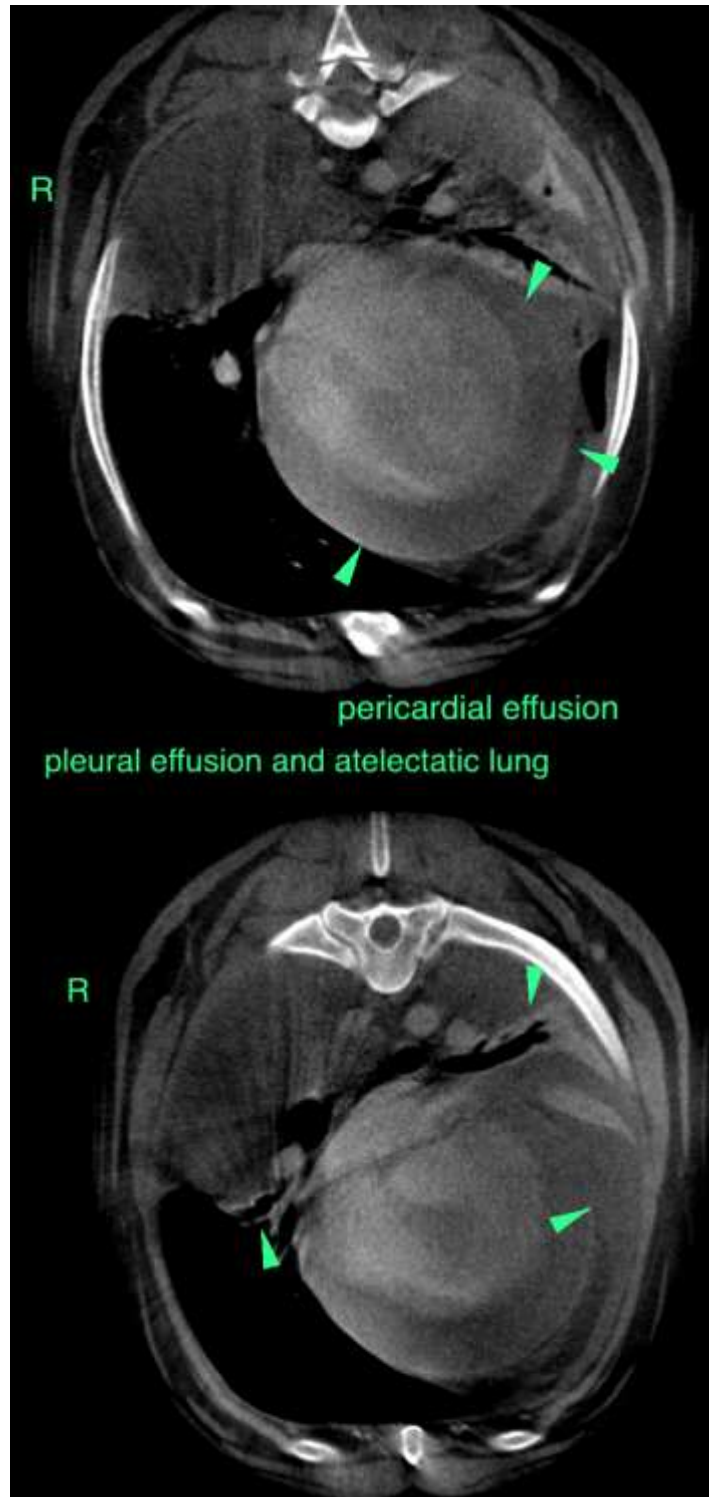
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pericardial effusion

pleural effusion and atelectatic lung



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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.

SPECIES

Canine

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

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