



PATIENT

Memphis Worrell

PRESENTING CLINICAL SIGNS

12/18/21 O says that Pt has been coughing for about a month - dry, O says that nothing comes up. O says that they Took P to "chandler dogs 24/7" last weekend. O went to Flagstaff - P was there for 72 hours at most. P has been lethargic ever since per O: sleeping more, laying down more, at night when time to go for a walk P is not excited. O says that P Has not been jumping on bed to get O. O says that P Has just been laying down. O says that P has No eye or nasal discharge. O says P's Cough is about the same - 4 times. O says that P was Licking left paw - not as much any more though. O says that there have been No other environmental changes. 12/31/21 - Pt came in for some radiograph, this time around Pt has been eating less then normal and drinking water less. When walking Pt out to O. Pt began to have productive cough with blood seen. A Desert blood profile was done and as well as a Urinalysis. Both come back normal. Abnormal PE/Chem/CBC/UA Results:

SPECIES

Canine

BREED

Australian Cattle
Dog/ Unknown
(Mixed)

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

A complete set of radiographs of the thorax and abdomen is provided for review.

SEX

Neutered Male

RADIOGRAPHIC FINDINGS

Thorax

The surrounding bony structures are within normal limits.

AGE

14 Years

In the subcutaneous tissue ventral to the sternum, an ovoid shaped, fat-opaque swelling is visible, measuring approximately 12.7 x 4.3 cm in size.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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.

HOSPITAL NAME

Ahwatukee Commons
Veterinary Hospital

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

REFERRING VET

Dr. Rebecca R.
Housley

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

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

INVOICE

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Abdomen

The surrounding bony structures are within normal limits.

DATE

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No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

**PATIENT**

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

Memphis Worrell

The hepatic volume is mildly increased, and the liver is protruding caudally beyond the costal arch; the caudoventral margins are mildly rounded.

SPECIES

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

Canine

Both kidneys are seen and present with normal opacity. The left kidney presents mild irregular lateral margins. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

BREEDAustralian Cattle
Dog/
Unknown
(Mixed)

The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

SEX

The colon is seen in the expected position and presents with appropriate content.

Neutered Male

RADIOGRAPHIC DIAGNOSIS

- Hepatomegaly
- Suspect left sided chronic nephropathy (e.g. chronic nephritis, renal infarction)
- Lipoma ventral thoracic wall
- No evidence of pulmonary metastatic disease

AGE

14 Years

INTERPRETED BYSebastian Schaub, DVM
Dr. med. vet. DipECVDI**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy, hepatitis or neoplastic infiltration. Ultrasound including FNA sampling can be used as minimally advanced diagnostic tests.

HOSPITAL NAMEAhwatukee Commons
Veterinary Hospital**REFERRING VET**Dr. Rebecca R.
Housley**INVOICE**

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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.

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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