


PATIENT PRESENTING CLINICAL SIGNS

Palomo Tubens
 PATIENT PRESENTED DUE TO LIMPING ON ONE OF HIS HIND LEGS. ON RADIOGRAPHS WAS SEEN A POSSIBLE MASS ON ABDOMINAL AREA AND PELLETS OR BULLETS ON THORAX.
 Abnormal PE/Chem/CBC/UA Results: N/A

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Canine
 A high resolution plain CT study of the thorax is provided for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Mixed
 Two metal attenuating air-gun pellets are appreciated along the right thoracic wall level 6th and 10th right intercostal space. Multifocal spondylosis formation is seen along the thoracic spine.

SEX
 The caudal endplate of the 6th sternebra and the cranial endplate of the 7th sternbra present crescent shaped defects of the endplates.

Male
 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.

AGE
 5 Years
 There is an intracardial metal attenuating body (suspect air-gun pellet), measuring 7 x 4.7 x 5.8 mm in size.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

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, but zones with dystelectasis caudal lung lobes bilaterally, R>L.

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

HOSPITAL NAME

Hospital Veterinario
 San Francisco de Asis

Multiple small intestinal loops ,mesenteric fat and the right kidney are extending far cranially in the right cranial abdomen, cranially beyond the cranial hepatic margin of the right liver lobes. The mesenteric fat and the small intestinal loops present a well-defined convex shaped cranial border – suspect right crus of the diaphragm that is in a far cranial position.

REFERRING VET COMPUTED TOMOGRAPHIC DIAGNOSIS

Dr. Rodriguez

- Two air-gun pellets right thoracic wall & one intracardiac pellet – likely level with the interventricular septum
- Far cranial position of the right crus of the diahragm
- Possible preceding osteomyelitis endplates 6th/7th sternebra – at this point no signs for active osteomyelitis
- Spondylosis deformans
- Dystelectasis caudal lung field

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43474

DATE

12/5/22



PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Palomo Tubens

The CT study indicates a history to be shot by an air-gun. Two pellets are stuck at the right thoracic wall and one is located intracardiac – likely within the interventricular septum, might cause myocarditis or arrhythmia.

SPECIES

Canine

The in the right abdomen cranially displaced abdominal organs are considered as a sequela to right sided phrenic nerve paralysis with the secondary far cranial position of the right crus of the diaphragm – the intracardiac pellet may have lacerated the right phrenic nerve before entering the heart as underlying cause. The well-defined convex shaped cranial border, separating the abdominal organs from the pleural cavity, would be unusual for diaphragmatic hernia.

BREED

Mixed

SEX

Male

AGE

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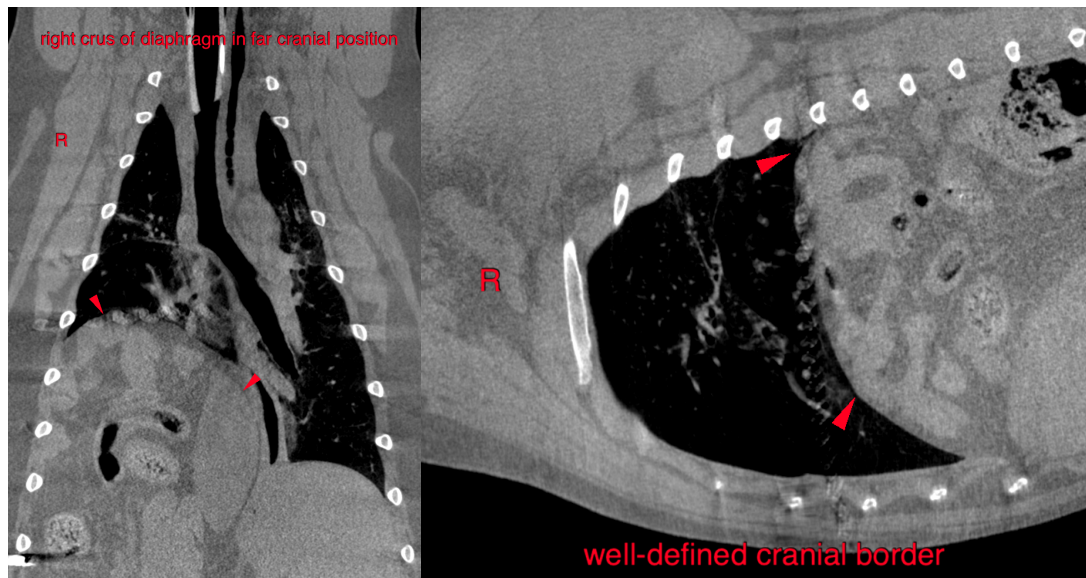
Dr. Rodriguez

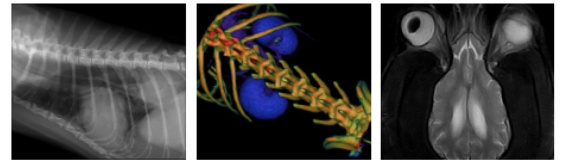
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PATIENT

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SPECIES

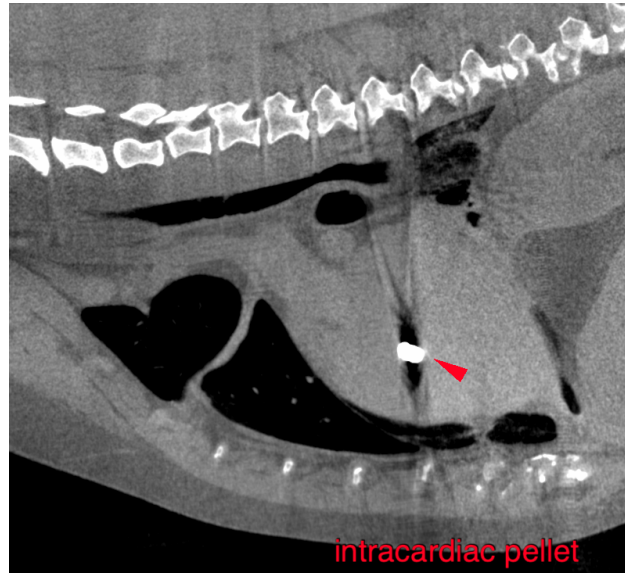
Canine

BREED

Mixed

SEX

Male



AGE

5 Years

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.

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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.

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