



**PATIENT**

Bernie Mazlo

**PRESENTING CLINICAL SIGNS**

Examined on 1/24 for difficulty breathing/gagging/congestion. Pt had increased Ca, increased LNs (all), no murmurs or arrhythmias. No improvement on doxycycline or clavamox. Abnormal PE/Chem/CBC/UA Results: Elevated Ca (12.6) on 1/24 Enlarged LNs Upper respiratory sounds

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

A consecutive study of the thorax is provided for review. Images are dated 1/24/22 and 2/14/22

**BREED**

Dachshund

**RADIOGRAPHIC FINDINGS**

Thorax 1/24/22

The body condition score is 8/9.

**SEX**

MN

Mild spondylosis formation is seen along the caudal thoracic spine. The sternum presents moderate degenerative changes.

The extrathoracic soft tissues present homogeneous without abnormalities.

**AGE**

11 Years, 5 Months

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.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The cranial mediastinum presents the expected soft tissue opacity. The mediastinum is moderately widened by fat.

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

**HOSPITAL NAME**

POCONO PEAK  
VETERINARY  
CENTER

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

The lung parenchyma presents the expected architecture and generalized moderate increased radiopacity due to an unstructured interstitial lung pattern; the intrapulmonary vascular branching is seen up to the third order lung vessels.

**REFERRING VET**

Dr. Christine Coyle

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

Thorax 2/14/22

**INVOICE**

50325

No additional findings or changes in comparison to the previous radiographic study.

**RADIOGRAPHIC DIAGNOSIS**

**DATE**

2-14-22

- Obesity
- Generalized mild to moderate unstructured interstitial lung pattern
- Degenerative changes sternum
- Mild spondylosis formation caudal thoracic spine



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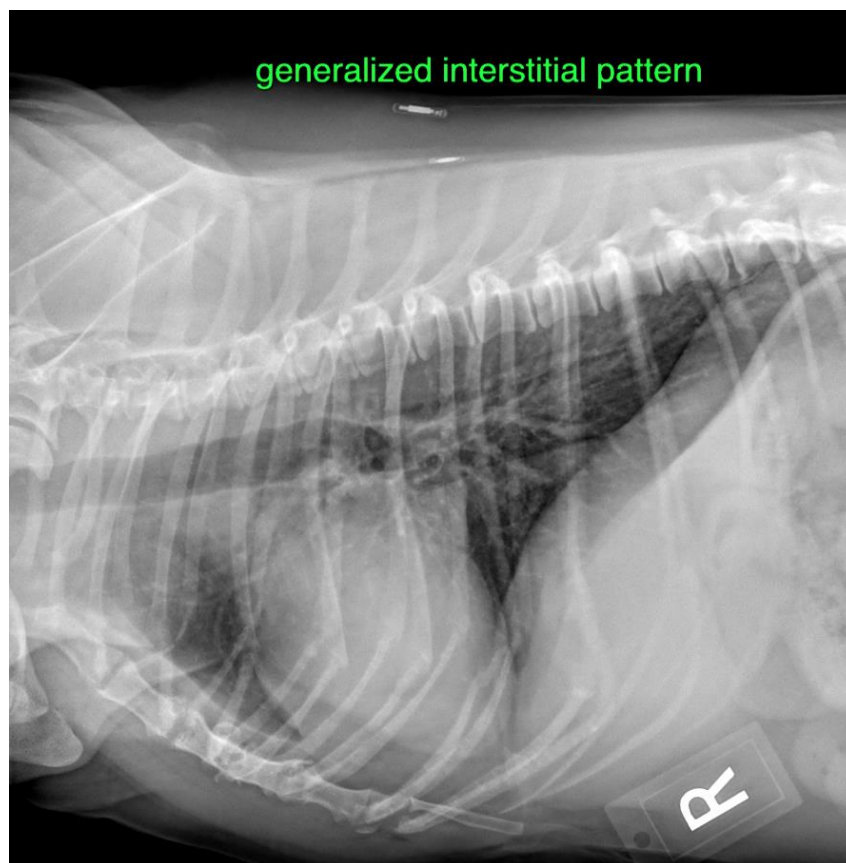
**DATE**

2-14-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The unstructured interstitial lung pattern is likely a sequela to the nutritional status and age related changes of the lung parenchyma. The odds for 'real' interstitial lung pattern are considered low – not specific and potentials would include fibrosis, pneumonitis (inflammatory versus infectious), systemic disease (e.g. pancreatitis, IMHA, renal disease), neoplasia.

If not done so yet, recommend FNA sampling of the clinically appreciated enlarged lymph nodes. Rule out primary hyperparathyroidism as cause for the hypercalcemia as well – such as functional parathyroid neoplasm.



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.

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