



**PATIENT**

Ziggy Griffen

**PRESENTING CLINICAL SIGNS**

Coughing, Suspect laryngeal paresis, Noted nodules in chest and some what improved with Amoxi/Clavamox 875/125 mg x 2 weeks.  
Abnormal PE/Chem/CBC/UA Results: CBC mostly improved after ABX course.

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**BREED**

Labrador Retriever

**RADIOGRAPHIC FINDINGS**

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

**SEX**

MN

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.

**AGE**

11

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.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

Superimposed on the caudoventral lung field, a well-defined, ovoid shaped soft tissue mass – following the contour of the accessory lung lobe is seen. The cranial lung lobes present granular mineralization, following the bronchial tree.

**HOSPITAL NAME**

POCONO PEAK  
VETERINARY  
CENTER

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

**RADIOGRAPHIC DIAGNOSIS**

- Solitary pulmonary soft tissue mass, possibly accessory lung lobe
- Pulmonary osteomas versus alveolar microlithiasis

**REFERRING VET**

Dr. Samantha  
Thompson

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The pulmonary mass is highly concerning for primary pulmonary neoplasia – such as bronchogenic carcinoma or round-cell neoplasia – or less likely pulmonary metastasis. Pulmonary granuloma, pulmonary cyst or lobar pneumonia are differentials but considered less likely. If surgical intervention is a consideration, complementing workup at least be a VD or DV projection or cross-sectional imaging is recommended. There is no evidence of metastatic disease, but the pulmonary osteomas versus alveolar microlithiasis – the cause is unknown, in human medicine it is an inherited autosomal recessive disorder. The clinical relevance of the latter is questionable and likely an incidental finding.

**INVOICE**

50268

**DATE**

2-14-22



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**SEX**

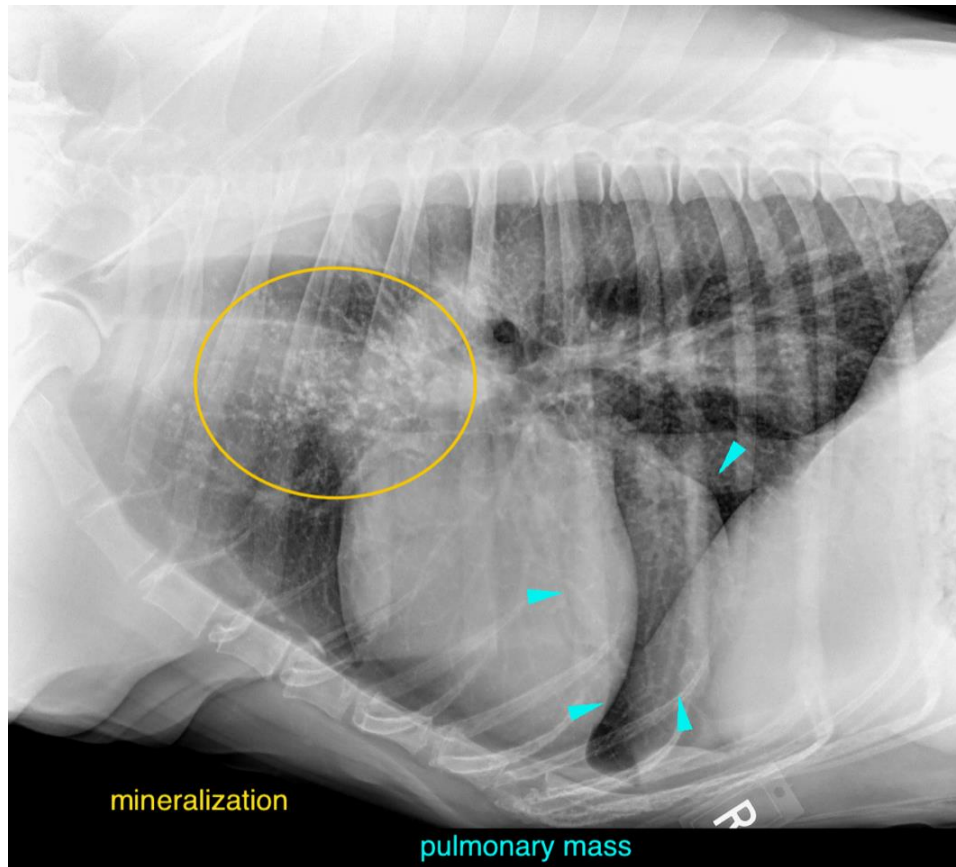
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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