



PATIENT

River Norris (Brook Edge Farm)

SPECIES

Canine

BREED

German Shepherd

SEX

Female Spayed

AGE

9Y

WEIGHT

89.20lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Joseph D'Abbraccio,
DVM

HOSPITAL NAME

Catskill Veterinary
Services, PLLC

REFERRING VET

Joseph D'Abbraccio,
DVM

INVOICE

73775

DATE

2-16-26

PRESENTING CLINICAL SIGNS

- Presenting Complaint: River Brook Edge Farm presents for traumatic injuries from inter-dog attack with housemate
- Patient History:
- Traumatic event occurred today
- Patient was in shock upon presentation
- Patient was ambulatory earlier but gurneyed into practice upon arrival

Abnormal PE/Chem/CBC/UA Results: PE: Oral: Excessive dental wear from toy behavior and play; Heart: Tachycardic, no murmurs or arrhythmias; Pulses: Femoral pulses thready to weak; Musculoskeletal: Ambulatory earlier, gurneyed into practice upon presentation; Integument: Severe wounds on front limbs bilaterally; deep wounds to ventral neck, right and left thoracic limbs, and ventral sternum; ventral sternal wounds deep down to muscle and bone with shredded muscle; CBC: RBC 9.07; Chem: Glucose 163; ALT 160; CRP 9.1;

COMPUTED TOMOGRAPHY OF THE NECK AND THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

The subcutaneous tissue along the ventral aspect of the neck and cranial aspect of the thorax is diffusely swollen and presents a diffuse soft tissue attenuation pattern with interspersed gas inclusion. Along the fascial planes of the neck and cranial thoracic wall a significant amount of free gas is seen. The gas along the fascial planes of the neck is continuous with gas within the mediastinum.

Along the thoracic spine, multifocal spondylosis formation is seen.

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.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

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.

Throughout the lung parenchyma, multiple small zones with dystelectasis are appreciated.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- History of bite insult
- Diffuse subcutaneous swelling along the ventral aspect of the neck – suspect inflammatory edema/hematoma
- Significant emphysema along the fascial planes along the neck, thoracic wall
- Pneumomediastinum
- Spondylosis deformans

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The emphysema is most likely a sequela to the soft tissue injuries – the pneumomediastinum is considered secondary to the emphysema as the mediastinum is continuous with the fascial planes of



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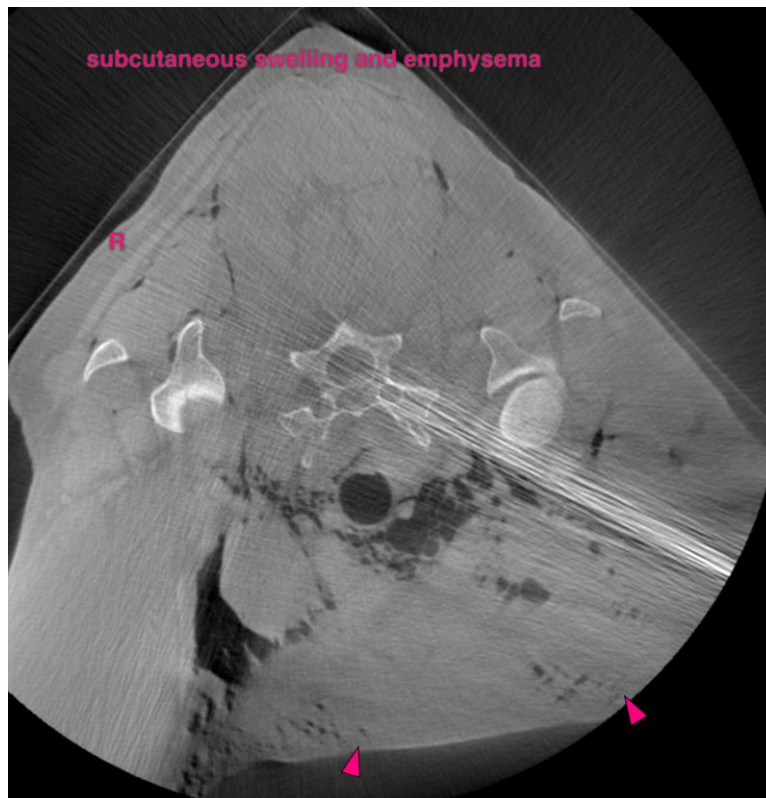
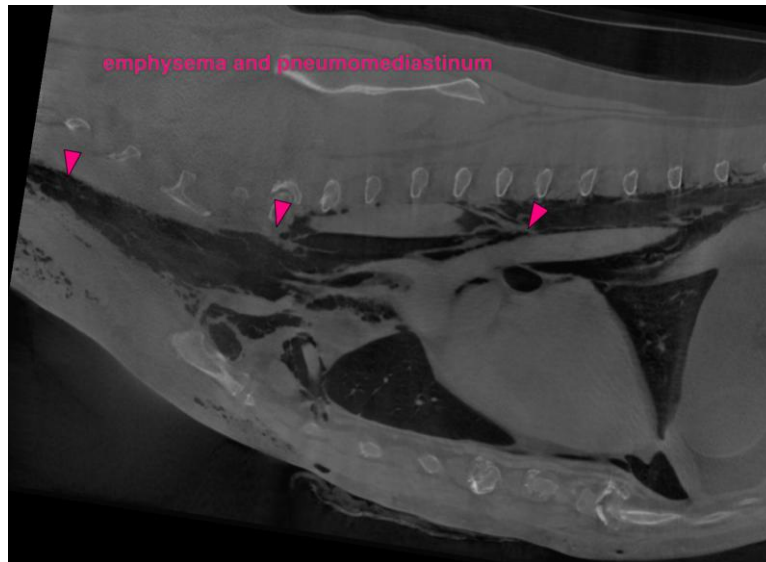
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the neck. A differential would be tracheal or less likely esophageal laceration. I do not see signs of perforation of the thoracic cavity nor osseous injuries.





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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
info@sonopath.com