



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Trigger Davis
SPECIES Canine
BREED American Pitbull Terrier

Trigger presented for hemoptysis. Radiographs revealed a large mass effect with regional lobar pathology. There is no known travel history that might be creating a valley fever infection. Trigger had mild dyspnea, hypoxia despite begun bilateral knees nasal oxygen support overnight. This am he had a CT scan completed pre and postcontrast. The scan was completed with breath holds. There is a large mass lesion that appears to be hilar lymph node in origin, appears to also be eroding through the bronchial wall. Images have been submitted to radiology at Sonopath, for definitive review. Even with surgery it is anticipated that trigger will heal very poor prognosis. There is diffuse intra-pulmonary hemorrhage evident. We are pending an owner decision, as to whether to proceed with surgery following up with chemotherapy.

COMPUTED TOMOGRAPHY OF THE THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX The bony and surrounding soft tissue structures are within normal limits.

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

INTERPRETED BY Sebastian Schaub, DVM Dr. med. vet. DipECVDI

In the caudodorsal aspect of the right cranial lung lobe, a well-defined, ovoidal, uniform soft tissue attenuating and contrast enhancing mass is seen, measuring 7.7 x 3.5 x 3.8 cm in size. The accompanying bronchi are deviated and distorted by the mass effect. In the medial aspect of the cranial part of the left cranial lung lobe, a well-defined, soft tissue attenuating nodule is seen, measuring 11 mm in diameter a second nodule is seen in the caudodorsal aspect of the right caudal lung lobe. The cranial lung lobes bilaterally present a significant unstructured reticular pattern. Multifocal throughout the lung parenchyma, soft tissue attenuating 'Ditzels' (nodules < 3 mm) are appreciated.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Pulmonary soft tissue mass right cranial lung lob
- Structured nodular interstitial lung pattern and significant unstructured interstitial lung pattern cranial lung lobes bilaterally – the volume is maintained

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE 56832

DATE 2-19-23

The pulmonary mass and the structured nodular interstitial lung pattern are highly suggestive for primary pulmonary neoplasia – such as carcinoma, histiocytic sarcoma. The diffuse interstitial pattern is most consistent with neoplastic invasion of the lung parenchyma as well. Theoretically granulomatous lung disease is a consideration, but no expected lymphadenopathy is appreciated. Ultrasound guided FNA sampling of the right lung mass by the 3rd/4th right intercostal space is considered feasible to confirm the diagnosis.

HOSPITAL NAME Southern Oregon Veterinary Specialty Center

REFERRING VET Ravi Seshadri



PATIENT

Trigger Davis

SPECIES

Canine

BREED

American Pitbull
Terrier

SEX

MN

AGE

10 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

REFERRING VET

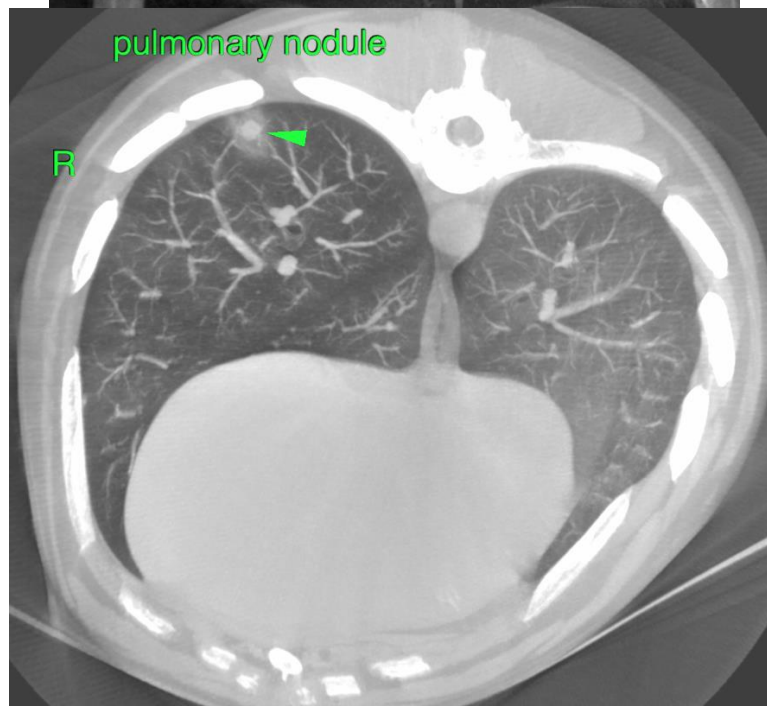
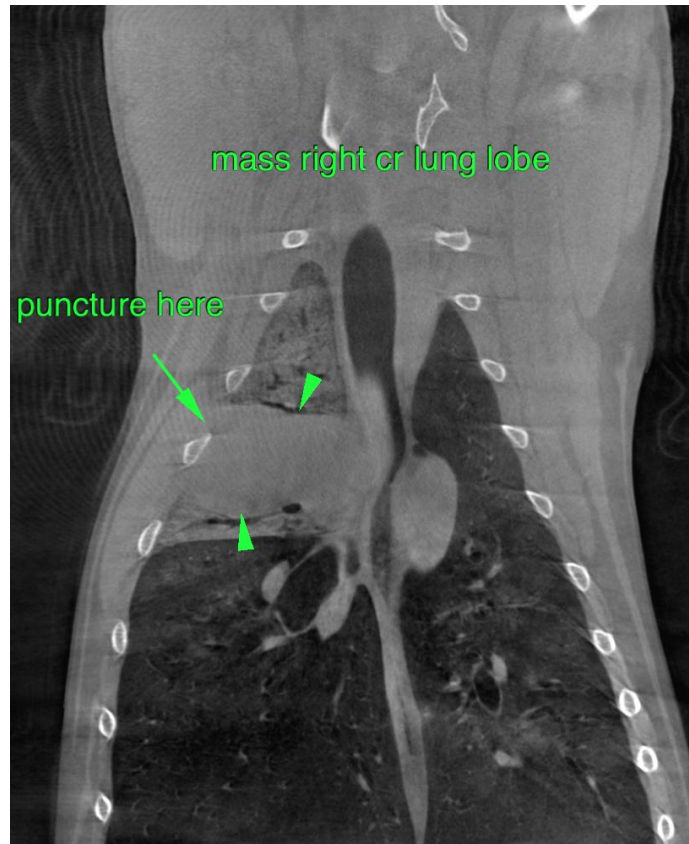
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SEX

MN

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com

AGE

10 Years

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