



PATIENT

Shukie Benyosef

SPECIES

Canine

BREED

Mixed Lg.

SEX

Male Neutered

AGE

12.5Y

WEIGHT

96.5lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Dr. Abina Glennon

HOSPITAL NAME

New Bridge Veterinary
Practice

REFERRING VET

Dr. Abina Glennon

INVOICE

73872

DATE

2-19-26

PRESENTING CLINICAL SIGNS

- Pre operative x-ray for surgery

Abnormal PE/Chem/CBC/UA Results: Bloodwork pending

RADIOGRAPHIC STUDY OF THE THORAX

A right and left lateral view of the thorax is provided for review.

RADIOGRAPHIC FINDINGS

The vertebral endplates T5/T6 present moderate spondylosis formation.

In the subcutaneous tissue at the caudoventral aspect of the sternum, a uniform fat opaque ovoid shaped swelling is seen.

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.

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

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

In the left lateral view, level with the 2nd intercostal space, a nodular soft tissue opacity is superimposed on the dorsal aspect of the trachea.

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

RADIOGRAPHIC DIAGNOSIS

- Suspect solitary pulmonary soft tissue nodule – likely in the right cranial lung lobe
- Spondylosis deformans T5/T6
- Subcutaneous lipoma caudoventral aspect of the sternum

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The solitary pulmonary soft tissue nodule can be a sequela to summation of normal anatomy or present a 'real' nodule – such as granuloma, fibrosis, round pneumonia/mucus impaction or metastasis. In case of doubt, a CT study can be used as advanced imaging modality.



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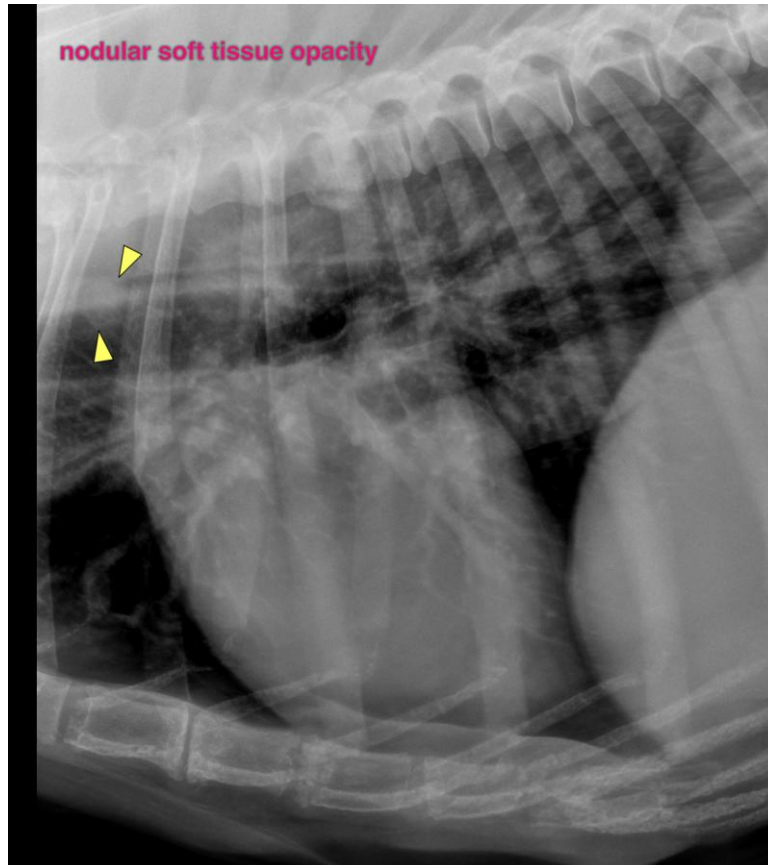
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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