



PATIENT PRESENTING CLINICAL SIGNS

Dexter Owen
 Seen at ER for regurgitation and aspiration pneumonia on 2/09/23. Is currently on clavamox and very much improved. Owner is adamant that Dexter is not eating any sand, gravel, grit. Xray report from ER on 2/9/23: CONCLUSIONS: 1. Focal alveolar pulmonary opacity, cranial segment of left cranial lung lobe. Differential diagnoses include aspiration pneumonia or focal atelectasis secondary to sedation. These changes are not severe enough to have caused the reported cyanosis, and an upper airway cause (brachycephalic obstructive airway syndrome) seems much more likely. 2. Hazy alveolar pulmonary pattern, caudal segment of left cranial lung lobe. This finding may be artifactual, however mild aspiration pneumonia cannot be ruled out. 3. Punctate mineral opacity material throughout the gastrointestinal tract. This is consistent with sand or dirt, possibly cat litter given the reported cats in the household. This can cause some gastrointestinal upset, however, there is no evidence of an impaction to warrant intervention. Abnormal PE/Chem/CBC/UA Results: Exam: Normal today.

SPECIES

Canine

BREED

French Bulldog

SEX

Male

AGE

12 Weeks, 5 Days

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME

Elizabeth Animal
 Hospital

REFERRING VET

Leon Anderson, DVM

INVOICE

56843

DATE

2-20-23

RADIOGRAPHIC STUDY OF THE THORAX

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

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits, the growth plates are age related open.

The extrathoracic soft tissues present homogeneous without abnormalities.

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 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.

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

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

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

In the cranial abdomen, the mild granular mineral opaque material is seen in the stomach some pictured small intestinal loops.

RADIOGRAPHIC DIAGNOSIS

- Normal thorax
- Mineralized material in stomach

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The current radiographic study presents remission of the history of pneumonia. No abnormal dilation of the esophagus is appreciated.



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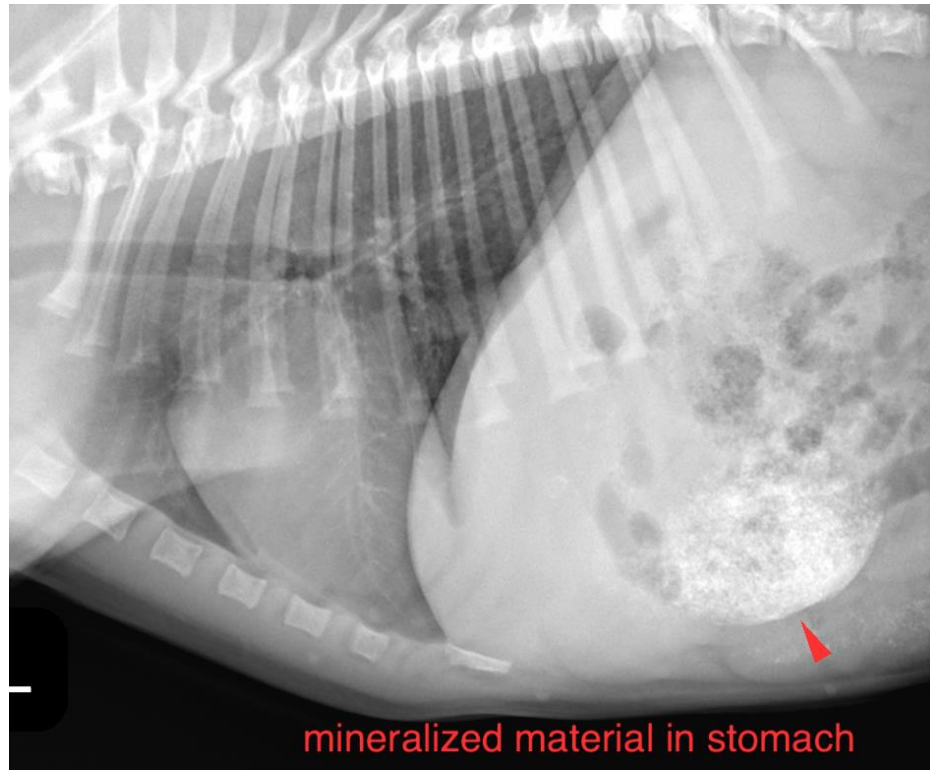
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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