



PATIENT PRESENTING CLINICAL SIGNS

Jack Weber Presented for lameness evaluation on Jan 10, 2022. Pt has been wt-bearing lame on a hindleg for the past 1.5-2mos. O unsure which leg affected, but pt also slower to rise and will stand with a hunched back for a minute after rising. O has noted some improvement over the past week, but not yet fully resolved. Pt originally from TX, moved here in 4/2021. Was on flea/tick/htwm prevention, but none currently. No other medications or jt supplements. Fed Purina One kibble. E/d/u/d wnl, no v/d/c/s noted. No other health concerns reported.

SPECIES

K9

BREED

Border Collie Mix

RADIOGRAPHIC STUDY OF THE THORACIC SPINE

Radiographs of the thoracic spine in two orthogonal imaging planes are provided for review.

SEX

MN

RADIOGRAPHIC FINDINGS

The osseous and surrounding soft tissue structures of the thoracic spine are within normal limits.

AGE

3.5 Years

There is a generalized increased radiopacity of the right lung lobes caused by a moderate ground glass opacification. A pleural fissure line is appreciated.

RADIOGRAPHIC DIAGNOSIS

- Unstructured interstitial pattern right lung lobes & possible mild right sided pleural effusion
- Normal thoracic spine

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Reid Veterinary Hospital

The radiographic study of the thoracic spine presents without abnormalities, explaining the described clinical signs. The right lung lobes present with a generalized unstructured interstitial pattern, which might be a sequela to compression atelectasis due to right lateral recumbency prior to the radiographic study – but no overt midline shift of the heart to the right. Potentials for an unstructured interstitial pattern can include fibrosis, pneumonitis (inflammatory versus infectious), systemic disease (e.g. pancreatitis, IMHA, renal disease), neoplasia. The pleural fissure line can indicate mild pleural effusion.

REFERRING VET

Jeff Popowich

As the thoracic changes are equivocal for pathology versus artefactual changes caused by preceding right lateral recumbency and there are no respiratory clinical signs, recheck radiographs can be used to rule in/out thoracic pathology.

INVOICE

50975

DATE

3-16-22



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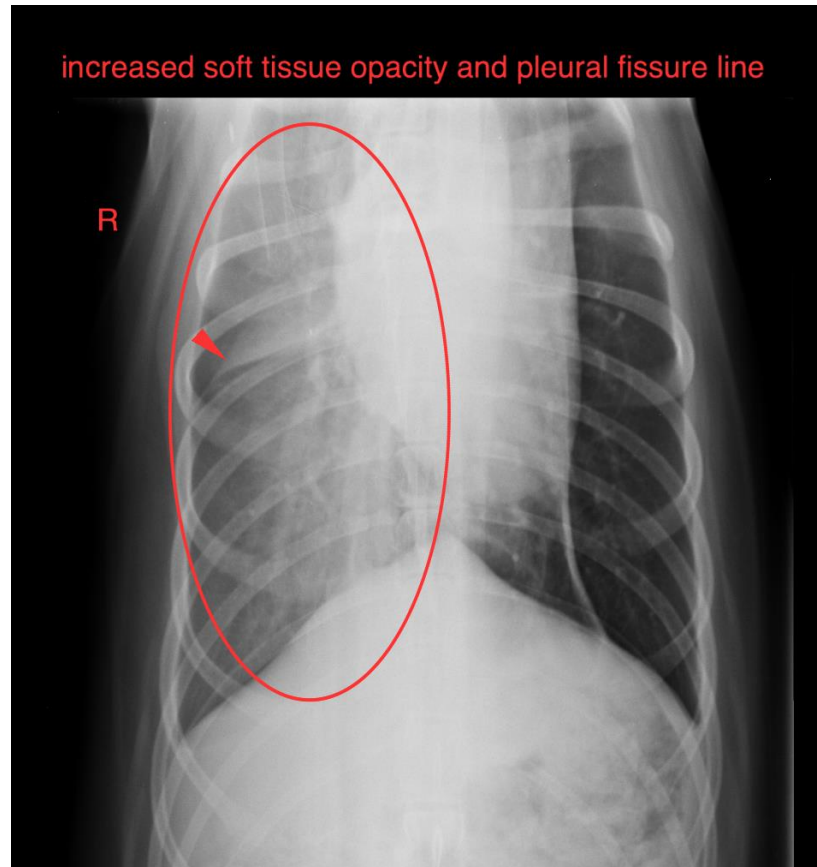
Jeff Popowich

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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.

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