



PATIENT

Walter Jackson

SPECIES

Canine

BREED

English Bulldog

SEX

Neutered Male

AGE

11 Years

WEIGHT

43 pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDD

IMAGING PERFORMED BY

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Gryspeerd

INVOICE

14507

DATE

03/19/26

PRESENTING CLINICAL SIGNS

- Chronic recurrent pneumonia
- Recurrent soft tissue opacity in the right cranial thorax on radiographs, first documented February 2025

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

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

The right tracheobronchial lymph node is mildly prominent.

In the cranioventral aspect of the mediastinum, an ovoid shaped, uniform soft tissue attenuating and contrast enhancing mass is seen; measuring 2.8 x 1.6 x 2.2 cm.

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

The ventral dependent aspects of the right cranial lung lobe are consolidated with air-bronchograms. The volume of the right cranial lung lobe is maintained. The bronchi of the right cranial lung lobe present a generalized mild to moderate thickened wall along with cylindrical dilation of the first degree bronchus. The remainder of the lung parenchyma present the expected architecture and attenuation behavior.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Ventrally distributed alveolar pattern right cranial lung lobe along with a bronchial pattern in the right cranial lung lobe
- Cylindrical bronchiectasis right cranial lung lobe
- Lymphadenopathy right tracheobronchial lymph node
- Small cranioventral mediastinal soft tissue mass without vascular invasion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are supporting the diagnosis of lobar (broncho)pneumonia affecting the right cranial lung lobe – the appreciated bronchiectasis is predisposing for recurrent airway infection and may trigger the pneumonia. Secondary reactive lymphoid hyperplasia right tracheobronchial lymph node.

The small cranioventral mediastinal soft tissue mass can present a prominent cranioventral mediastinal lymph due to reactive lymphoid hyperplasia or soft tissue neoplasia – such as thymoma, thymic sarcoma/carcinoma/lymphosarcoma, ectopic thyroid carcinoma, other. Ultrasound guided FNA sampling can be tried for specification.



PATIENT

Walter Jackson

SPECIES

Canine

BREED

English Bulldog

SEX

Neutered Male

AGE

11 Years

WEIGHT

43 pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

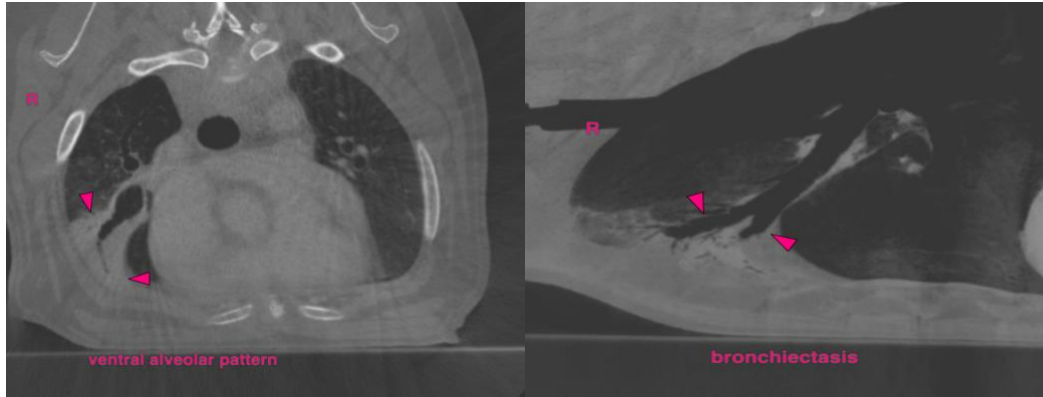
Dr. Gryspeerd

INVOICE

14507

DATE

03/19/26



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, DVM, Dr. med. vet. DipECVDI
info@sonopath.com