

**PATIENT**

Sally Mott

PRESENTING CLINICAL SIGNS

chronic cough, since Sept 2022, not responsive to antibiotic (baytril) or low steroids (Tem-P).
Abnormal PE/Chem/CBC/UA Results: Lost 8 oz in 2-3 months. T: 103.7, no murmur, HR:140, sinus arrhythmia. no sounds auscultated!

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX

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

BREED

Dach

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

SEX

FS

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement.

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.

AGE

12 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The left caudal lung lobe presents with a soft tissue opaque mass with interspersed roundish gas opacities. The mass in the left caudal lung lobe is occupying approximately 4 intercostal spaces. The bronchus of the left caudal lung lobe is obliterated. The remainder of the lung parenchyma are aerated and present the expected architecture.

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

HOSPITAL NAME

Maher Animal
Hospital

RADIOGRAPHIC DIAGNOSIS

- Pulmonary mass left caudal lung lobe

REFERRING VET

Katie Maher

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pulmonary mass originating from the left caudal lung lobe is consistent with primary pulmonary neoplasia – carcinoma is considered likely. FNA sampling of the mass by the 7th left intercostal space can be performed to confirm the diagnosis. I do not see evidence of metastatic spread. If surgery is an option, a CT study of the thorax can be performed for surgical planning and ruling out smaller metastasis of the lung.

INVOICE

57097

DATE

3-6-23



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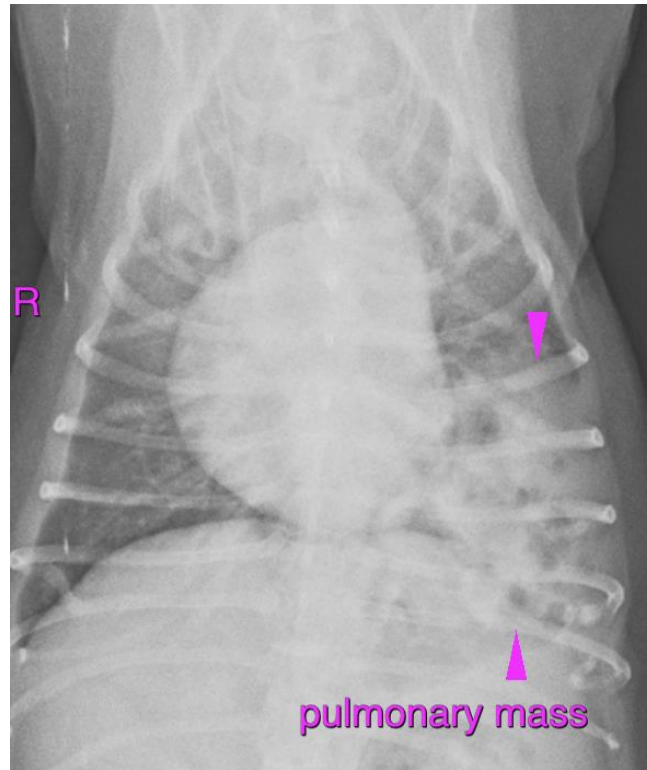
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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