



PATIENT

Baby Calhoun

SPECIES

Canine

BREED

Jack Russell Mix

SEX

Spayed

AGE

14

WEIGHT

13.10

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Jessica Morgan RVT

HOSPITAL NAME

Oxford County
Veterinary Clinic

REFERRING VET

Paisley Canning

INVOICE

74436

DATE

4-1-26

PRESENTING CLINICAL SIGNS

- dog is constantly panting, grade 5 HM, there is an aggressive tumour on the vulva lip that is fast growing, gets necrotic
- -owner is considering surgery to remove vulva mass - do not have a biopsy on that yet
- concerns about heart disease and with mets on the chest xrays

Abnormal PE/Chem/CBC/UA Results: see attachment proBNP is 1900

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 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 mediastinum is moderately widened by fat.

The trachea is normal in diameter, and the luminal outline of the trachea is smooth. The intrathoracic tracheal segment presents a right sided deviation – considered as a normal variant – there no evidence of mass effect.

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

The lung parenchyma presents the expected architecture and opacity with randomly distributed interspersed punctuate mineralization; 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.

The hepatic volume is increased, the caudoventral hepatic margins are rounded and are protruding caudally beyond the costal arch. The gastric axis is deviated caudally. The hepatic parenchyma has a homogeneous soft tissue opacity.

RADIOGRAPHIC DIAGNOSIS

- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appreciated pulmonary mineralizations are most consistent with pulmonary osteomas, possible differentials can include preceding mycotic infection such as Histoplasmosis (no signs of lymphadenopathy), parasitic infection or less likely pulmonary alveolar microlithiasis.

No abnormalities are appreciated that do explain the panting.

The cardiac size is considered normal – if a heart murmur is present workup can be complemented by a cardiac echo.



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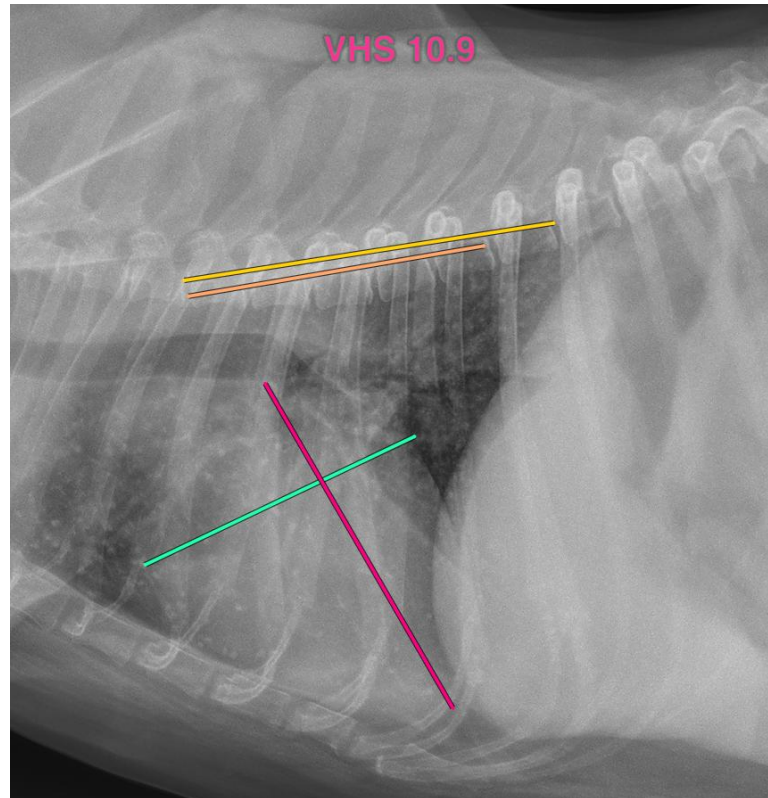
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Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy ± hepatitis or less likely diffuse neoplastic infiltration. Ultrasound can be used for specification and will allow FNA sampling as advanced minimally invasive diagnostic tool.



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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