



**PATIENT**

Dawson Schaad

**PRESENTING CLINICAL SIGNS**

Presented to referring veterinarian April 08 for lethargy, seeming out of breath, difficulty with stairs and reduced energy for walks. Radiographs taken showed lung mass; mass like lesion in right caudal lung lobe. BW unremarkable aside from mild elevation ALT.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN**

A pre- and post-contrast CT study of the skull, thorax and abdomen are provided for review.

**BREED**

Labrador Retriever

**COMPUTED TOMOGRAPHIC FINDINGS**

Skull

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

**SEX**

MN

At the lateral aspect of the right nostril, a well-defined, central fluid attenuating mass, measuring 13 mm in diameter is visible. The right aspect of the incisor bone, that is in contact with the fluid attenuating mass, presents with a mild concave depression of the osseous surface.

**AGE**

4 Years

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

**HOSPITAL NAME**

Animal Health  
Partners

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

**REFERRING VET**

Shannon Westgarth

Thorax

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

**INVOICE**

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The sternal, cranial mediastinal and middle tracheobronchial lymph nodes are prominent with a mild heterogeneous contrast enhancement pattern.

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

**DATE**

4-12-22

In the ventral aspect of the right caudal lung lobe, a consolidated lesion with irregular air-bronchograms and mild heterogeneous contrast enhancement pattern is seen. The volume of the consolidated right caudal lung lobe is maintained/mildly increased. Multifocal throughout the remaining lung lobes, well-defined soft tissue attenuating nodules, measuring up to 10 mm in size are visible.



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

Abdomen

**SPECIES**

Canine

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**BREED**

Labrador Retriever

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

**SEX**

MN

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**AGE**

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The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The lumbosacral intervertebral disc is mild to moderately protruding into the vertebral canal, occupying approximately

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Pulmonary mass right caudal lung lobe
- Structured nodular interstitial lung pattern
- Lymphadenopathy middle tracheobronchial, cranial mediastinal and sternal lymph nodes
- Cavitary mass ventrolateral aspect right nostril
- Normal abdomen

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET**

Shannon Westgarth

The findings are highly concerning for primary pulmonary neoplasia with metastatic spread to the remaining lung lobes and regional lymph nodes. Potentials include round cell tumor, bronchogenic/broncho-alveolar carcinoma. The Theoretically granulomatous lung disease (e.g. protozoal, mycotic, parasitic) is a consideration but the odds are low. If not done so yet, recommend FNA sampling of the pulmonary mass of the right caudal lung lobe – level with the 6<sup>th</sup>/7<sup>th</sup> right intercostal space.

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There is a cystic lesion at the right ventrolateral aspect of the right nostril with secondary mild pressure atrophy of the incisor bone at the same level. Rule out dermal cyst or cystic neoplasm – but no signs of local aggressive behavior. There is no macroscopic association with the dental structures. FNA sampling might be used as advanced diagnostic test.

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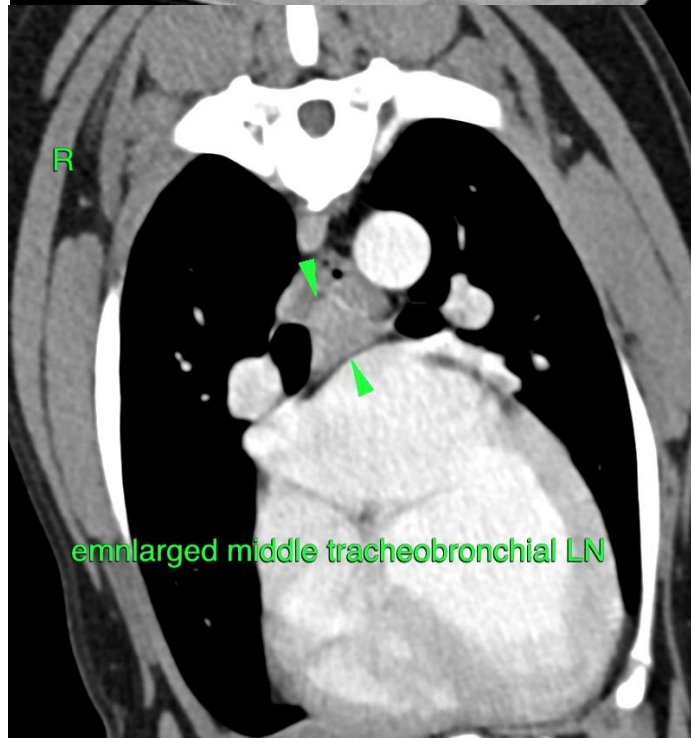
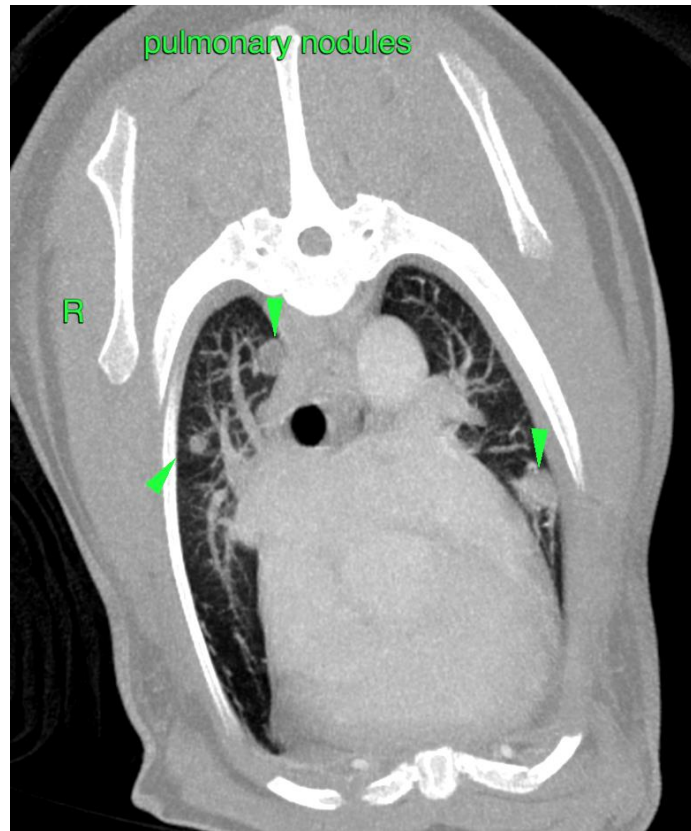
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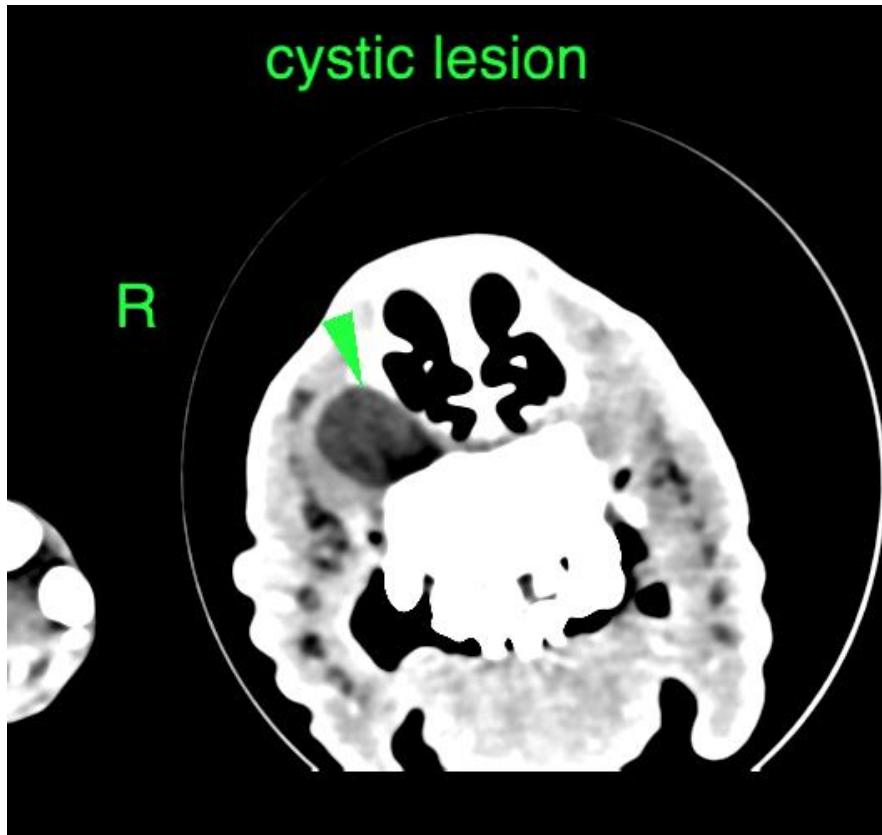
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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