



## PATIENT

Waylon Driver

## SPECIES

Canine

## BREED

Lab Ret.

## SEX

NM

## AGE

12Y

## WEIGHT

99.7lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Holly LVT

## HOSPITAL NAME

All Pets Medical  
Center

## REFERRING VET

Agnes Rupley, DVM

## INVOICE

75066

## DATE

5-20-26

## PRESENTING CLINICAL SIGNS

Presented for annual. History of Cushings, neuropathy (lacks rear limb proprioception / chronic), hip dysplasia, hypothyroidism.

Expiratory stridor. Left laryngeal paralysis.

Abdominal ultrasound performed to evaluate the cranial abdominal pain (new).

Thoracic rads performed to evaluate expiratory stridor.

Urinalysis results reveal protein 300, pH 6.0, and Specific Gravity: 1.042. Urine protein : creatinine submitted. ProBNP is normal <500. Chemistry 17 revealed elevated alk phos st 236 (303 last visit), with normal other results. CBC and manual slide evaluation results were normal. Fecal float neg. 4DX neg.

Spleen was coarse and ultrasound guided aspirate and cytology performed. Cytology pending.

## RADIOGRAPHIC STUDY OF THE THORAX

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

## RADIOGRAPHIC FINDINGS

Along the thoracic spine, multifocal spondylosis formation is seen.

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 mediastinal width is less than twice the width of the vertebral column at the same level.

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

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

The lung parenchyma presents the expected architecture and generalized mild to moderate ground glass opacity - secondary to expiration ± age related changes of the lung; 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.

## RADIOGRAPHIC DIAGNOSIS

- Spondylosis deformans thoracic spine
- Normal lower airways

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study of the thorax reveals no clinically relevant abnormalities.



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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  
[info@sonopath.com](mailto:info@sonopath.com)