



**PATIENT PRESENTING CLINICAL SIGNS**

Raspberry Allen History: Presented hx of vomiting/regurgitation within 5 minutes of eating. No other issues. Concern for vascular ring anomaly

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Normal

Canine **COMPUTED TOMOGRAPHIC STUDY OF THE THORAX**

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

**BREED** **COMPUTED TOMOGRAPHIC FINDINGS**

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

**SEX** The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.  
Intact Female

**AGE** The aortic arch is located on the right lateral aspect of the trachea. The intrathoracic segment of the esophagus, cranial to the aortic arch is moderately distended by gas. The left subclavian artery is crossing the esophagus dorsally.  
2 Years

**INTERPRETED BY** The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.  
Sebastian Schaub, DVM Dr. med. vet. DipECVDI

The lung parenchyma presents the expected architecture and attenuation behavior.

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

**HOSPITAL NAME** **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Northeast VRH

- Vascular ring anomaly due to persistent fourth right aortic arch (Type I) – no contrast enhancement of the ligamentum arteriosum is appreciated

**REFERRING VET**

- Secondary pulsation diverticulum cranial segment of the esophagus
- No evidence of aspiration pneumonia

Dr. Runde **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE** The CT study is consistent with vascular ring anomaly, due to persistent right aortic arch and secondary pulsation diverticulum of the cranial esophageal segment.  
16174

The dorsal position of the left subclavian artery is commonly not associated with clinical signs, as the esophagus can slide laterally to the trachea.

**DATE**

6/16/22



**PATIENT**

Raspberry Allen

**SPECIES**

Canine

**BREED**

Labrador Retriever

**SEX**

Intact Female

**AGE**

2 Years

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

**HOSPITAL NAME**

Northeast VRH

**REFERRING VET**

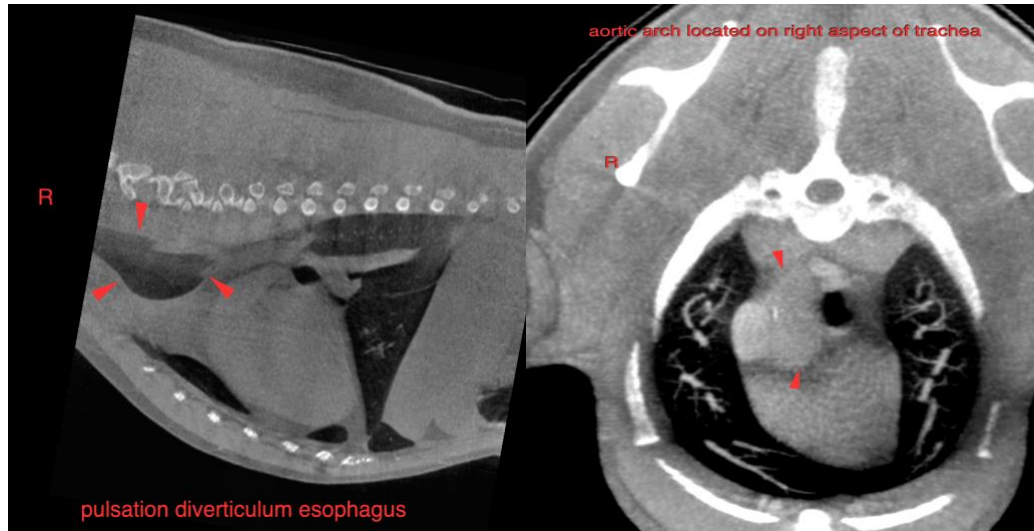
Dr. Runde

**INVOICE**

16174

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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.

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