



PATIENT PRESENTING CLINICAL SIGNS

Zane Clark History from my colleague: " chronic dilute urine but Laura adds water to food. recent loss of muscle mass and weight loss. Most of Laura's pets are overfed. I am worried about cancer but he passed all of these tests 3 months ago. so maybe IBD? We may have to follow up with endoscopy. Stools are formed, no vomiting, appetite is excellent. Laura has been feeding more calories." The owner is the director of our local humane society

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: normal CBC/ chem / ua and neg fecal pending TLI/Folate/cobalamin

BREED

Mix

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

A complete set of radiographs of the thorax & abdomen is provided for review.

RADIOGRAPHIC FINDINGS

SEX

Thorax

MN

Multifocal moderate spondylosis formation is seen along the thoracic spine. The spinous process of T5 presents an ill-defined geographic osteolytic lesion of the mid segment.

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

13

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.

INTERPRETED BY

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.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

HOSPITAL NAME

Northshore
Veterinary Hospital

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 unstructured reticular pattern; the intrapulmonary vascular branching is seen up to the third order lung vessels.

REFERRING VET

Brita Kiffney

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

Abdomen

Along the lumbar spine, multifocal spondylosis formation is seen. Convex shaped mineralized material is superimposed on the neuroforamen L4/L5.

INVOICE

59068

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in position, size and presents uniform opacity.

DATE

6-28-23

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower



PATIENT urinary tract.

Zane Clark The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

SPECIES

The colon is seen in the expected position and presents with appropriate content.

Canine

RADIOGRAPHIC DIAGNOSIS

BREED

- Generalized unstructured interstitial lung pattern
- Mineralized material superimposed on neuroforamen L4/L5 – lateral spondylosis formation versus mild protrusion of mineralized disc material
- Suspect fatty bone marrow replacement spinous process T5
- Spondylosis deformans

Mix

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

MN

The unstructured interstitial lung pattern is most likely a sequela to the nutritional status and age related changes of the lung parenchyma. The odds for 'real' interstitial lung pattern are considered low – non specific potentials would include fibrosis, pneumonitis (inflammatory versus infectious), systemic disease (e.g. pancreatitis, IMHA, renal disease), neoplasia.

AGE

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The geographic osteolytic lesion of the spinous process T5 is considered as fatty bone marrow replacement, I would consider the odds for malignant disease low. In case of doubt, recommend follow up radiographs in 4-8 weeks to check if there are progressive changes.

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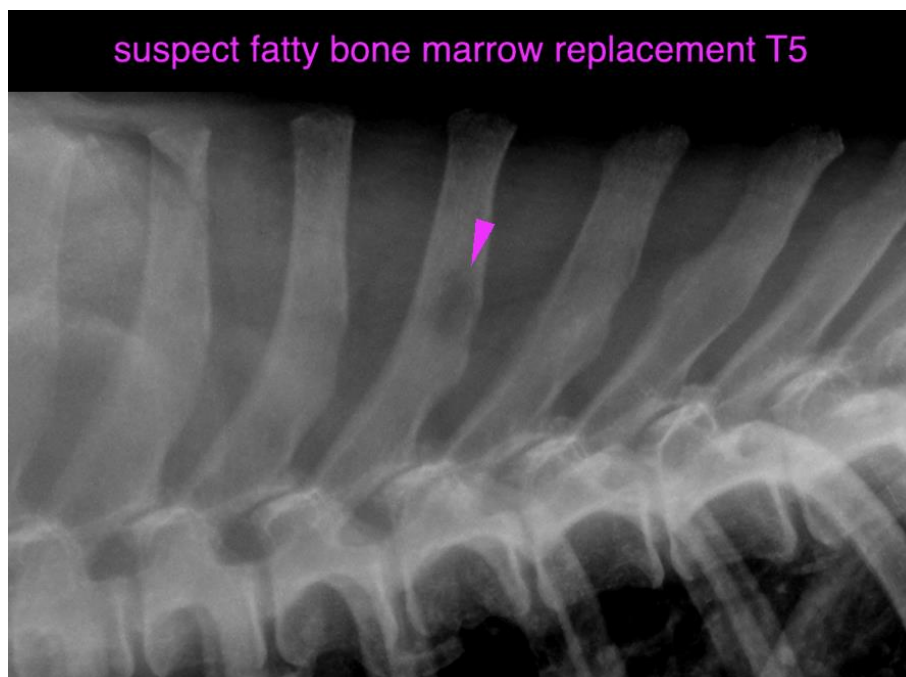
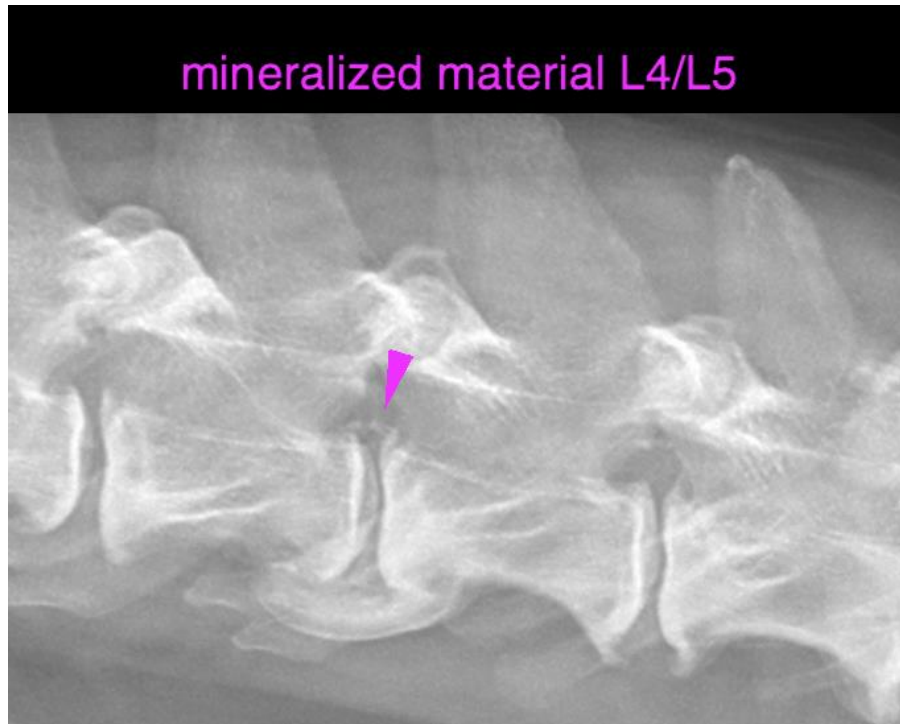
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PATIENT

Zane Clark

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.

SPECIES

Canine

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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