



PATIENT

Monster Mitchell

SPECIES

Canine

BREED

Great Dane

SEX

FI

AGE

8.5 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Companion Animal
Clinic

REFERRING VET

Casita

INVOICE

52335

DATE

6-6-22

PRESENTING CLINICAL SIGNS

Chest rads done prior to mammary mass removal, spay not performed due to P age and pulmonary changes seen, O reports P has had increased harsh lung sounds when sleeping and more snoring for about a month, no cough

Abnormal PE/Chem/CBC/UA Results: Large firm nodular mammary mass with lactation on Left caudal abdominal gland, no respiratory or cardiac abnormality noted Pre-op labs normal

RADIOGRAPHIC STUDY OF THE THORAX

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

RADIOGRAPHIC FINDINGS

The body condition score is 8/9.

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 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 a generalized moderate ground glass opacification of the lung parenchyma, due to the nutritional status. In the right lateral view of the thorax, level with the 2nd intercostal space, superimposed on the ventral third of the trachea, a roundish soft tissue opacity is noted, measuring 13 mm in diameter.

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

RADIOGRAPHIC DIAGNOSIS

- Obesity
- Possible solitary pulmonary nodule

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a roundish soft tissue opacification of the left cranial lung lobe that might be caused by summation of overlying normal structures, however, a pulmonary nodule lesion is possible and differentials include granuloma, round pneumonia/mucus impaction, pulmonary cyst, or metastatic disease. In case of doubt, either repeating the radiographic study of the thorax in 2-4 weeks or a CT study of the thorax is recommended.



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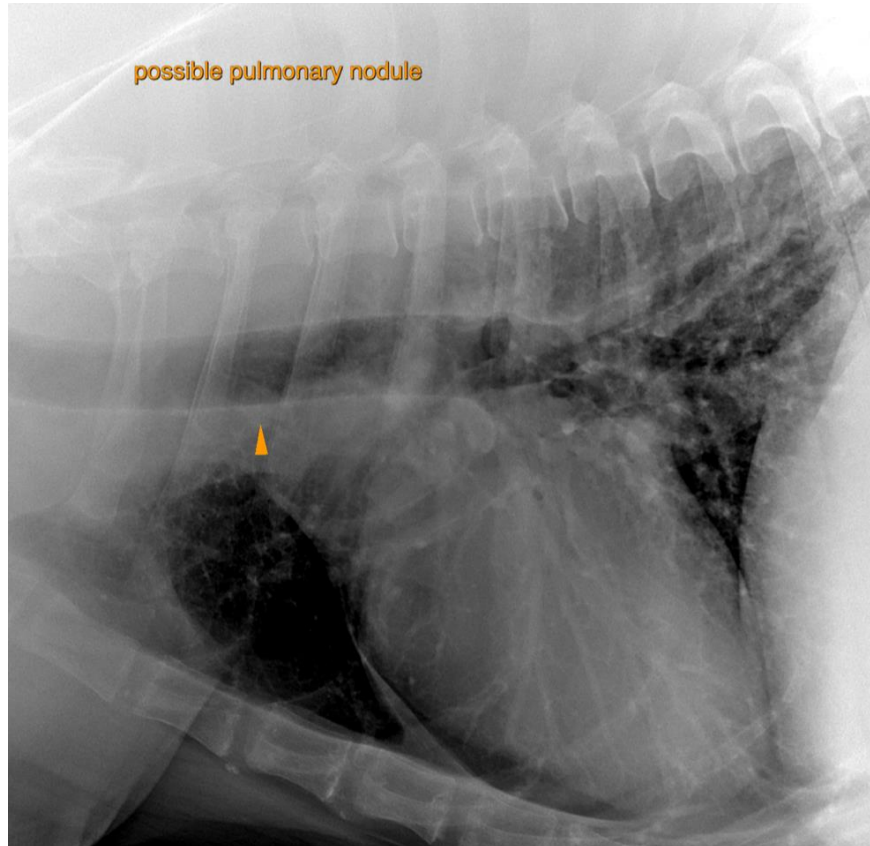
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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