



**PATIENT**

Macy Murray

**PRESENTING CLINICAL SIGNS**

Seen for coughing up blood June 2020 - CT was concerning for pulmonary metastasis, but repeat CT 3 months later was static so considered less likely June 2021 coughed up a bit of blood, and again June 2022 Coughing seemed to get better Today presented for laboured breathing for last 2 hours - admitted to ICU for pneumothorax

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX**

A high pre- and post-contrast CT study of the thorax in a bone, lung and soft tissue reconstruction are provided for review.

**BREED**

Rottweiler

**COMPUTED TOMOGRAPHIC FINDINGS**

A chest tube is entering the right pleural cavity by the 7<sup>th</sup> intercostal space.

**SEX**

FS

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.

**AGE**

9 Years

A moderate amount of free gas is seen in the pleural cavity. The lung lobes are retracted from the thoracic wall and multiple regions of dystelectasis are appreciated. In the ventral aspect of the pleural cavity, a small amount of gravity dependent, fluid attenuating material is visible.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

In the caudodorsal aspect of the right caudal lung lobe, a bronchial segment is obliterated by soft tissue material with interspersed linear hyperattenuating material. At the most caudodorsal aspect of the right caudal lung lobe, a thick wall gas filled cavitory lesion is appreciated, measuring 2.6 cm in size with evidence of perforation of the wall.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Thick walled cavitory lesion right caudal lung lobe with associated bronchial foreign body
- Pneumohydrothorax
- Degenerative osteoarthritis shoulder joints bilaterally
- Pulmonary osteomas

**HOSPITAL NAME**

Animal Health  
Partners

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET**

Dr. Lea Mehrkens

The findings are consistent with aspirated foreign body in the right caudal lung lobe with evidence of perforated pulmonary abscess and secondary pneumothorax and pleural effusion – likely septic. Surgical management with partial lobectomy of the right caudal lung lobe is the therapy of choice.

**INVOICE**

52884

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7-15-22



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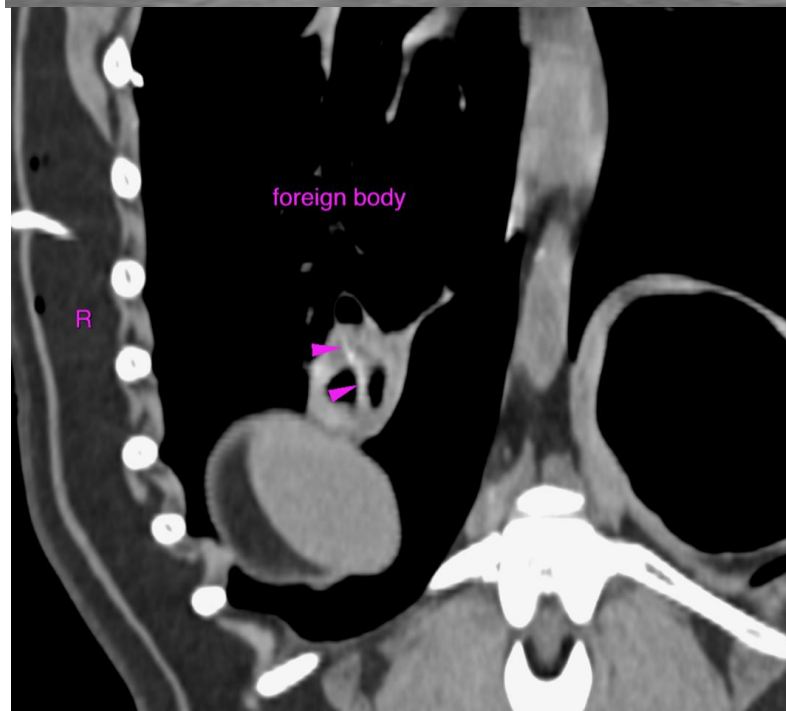
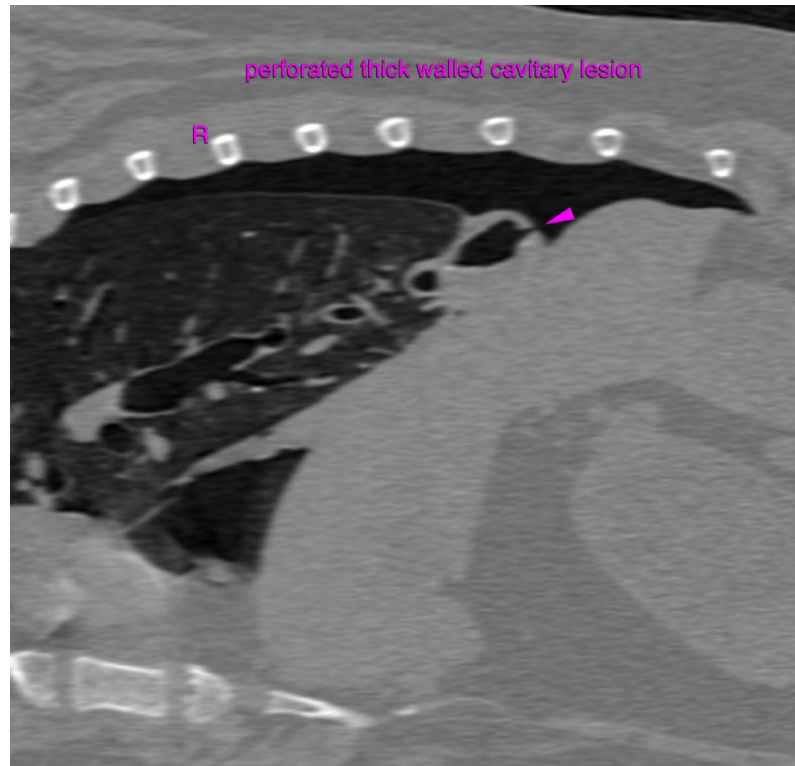
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**BREED**

Rottweiler

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  
sebast.schaub@gmail.com

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FS

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