



PATIENT PRESENTING CLINICAL SIGNS

Finn Dumond Chest CT: Scan done pre contrast, then contrast was given and scan was performed immediately with technician gowned in CT room. Then a 1 minute delayed scan taken, then a 2 minute delayed scan taken. (contrast = 1ml/kg of omnipaque) Presented to the Toronto Animal Health Partners Surgery Service for suspected vascular ring anomaly causing megaesophagus. He was adopted on June 19, 2023 where he was vomiting/regurgitating multiple times daily. He originally presented to his primary veterinarian for the issue June 19, 20, 2023 for vomiting/ regurgitating daily where he was treated with dewormer and sucralfate. The most recent visit (6/24/23), bloodwork was performed and unremarkable. A barium study was performed, suspicion of cardiomegaly without sign of cardiac failure - cardiac silhouette enlarged, trachea displaced dorsally at level of heart base, kinking of trachea at level of 4th vertebrae, bulge in the area of the projection of the right atrium/pulmonary trunk.

SPECIES

Canine

BREED

Cockapoo

COMPUTED TOMOGRAPHY OF THE THORAX

SEX

M

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

COMPUTED TOMOGRAPHIC FINDINGS

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

AGE

3 Months

The aortic arch is located at the right aspect of the trachea, deviating the trachea at the same level to the left. The left subclavian artery is crossing dorsally over the esophagus. The right subclavian artery is seen as a separate branch originating from the aortic arch, dorsal to the cephalic trunk. The esophagus in the cranial mediastinum is dilated and contains gas and foamy soft tissue material. The cranial mediastinum is widened by the dilated esophagus. Level with the base of the heart, the esophagus presents an abrupt decreased diameter and the caudal intrathoracic segment of the esophagus is not dilated.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Animal Health Partners

The cardiovascular structures including the pulmonary vasculature are within normal limits.

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.

REFERRING VET

Dr. Debbie Reynolds

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.

INVOICE

59439

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Vascular ring anomaly due to persistent right fourth aortic arch –Type 3, persistent right aortic arch with left ligamentum arteriosum and left subclavian artery
- Secondary pulsation diverticulum cranial intrathoracic segment of the esophagus
- No evidence of aspiration pneumonia

DATE

7-18-23



PATIENT

Finn Dumond

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms the diagnosis of vascular ring anomaly and surgical management to release the esophagus is the therapy of choice.

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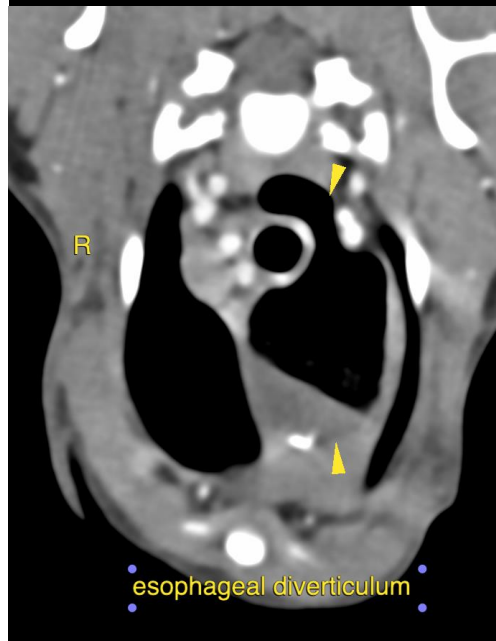
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

BREED

Cockapoo

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.

SEX

M

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI

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