



PATIENT PRESENTING CLINICAL SIGNS

Bauer Sverduk 6/3- presented to rdvm for lethargy and was diagnosed with left sided bronchopneumonia. Treated with 10 days of Baytril and chest radiographs taken on 6/23 showed resolution of the pneumonia Presented here on 7/5 for labored breathing. Pleural effusion and left lung lobe consolidation noted. Removed approximately 300 mls of chylous type fluid from the left thorax. Abnormal PE/Chem/CBC/UA Results: Albumin 2.5. Neut8765 Otherwise normal.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

BREED

Canine

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

SEX

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

FI

In the pleural cavity, a moderate amount of gravity, dependent, non-contrast enhancing soft tissue attenuating material is present. Pleural fissure lines are appreciated. The lung lobes are retracted from the thoracic wall and present a generalized decreased volume. Multiple regions with dystelectasis of the lung parenchyma are visible.

AGE

5

In the cranioventral aspect of the pleural cavity, a small amount of free gas is seen.

INTERPRETED BY

The pleural lining is significantly thickened in the ventral aspects of the mediastinum.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The sternal lymph nodes are prominent and present a mild heterogeneous contrast enhancement pattern.

HOSPITAL NAME

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

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

Abdomen

REFERRING VET

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Dr. Runde

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

INVOICE

Both liver and spleen present with normal shape, even surface, uniformly contrast enhancement, unremarkable.

52714

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous contrast enhancing.

DATE

7-6-22

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.



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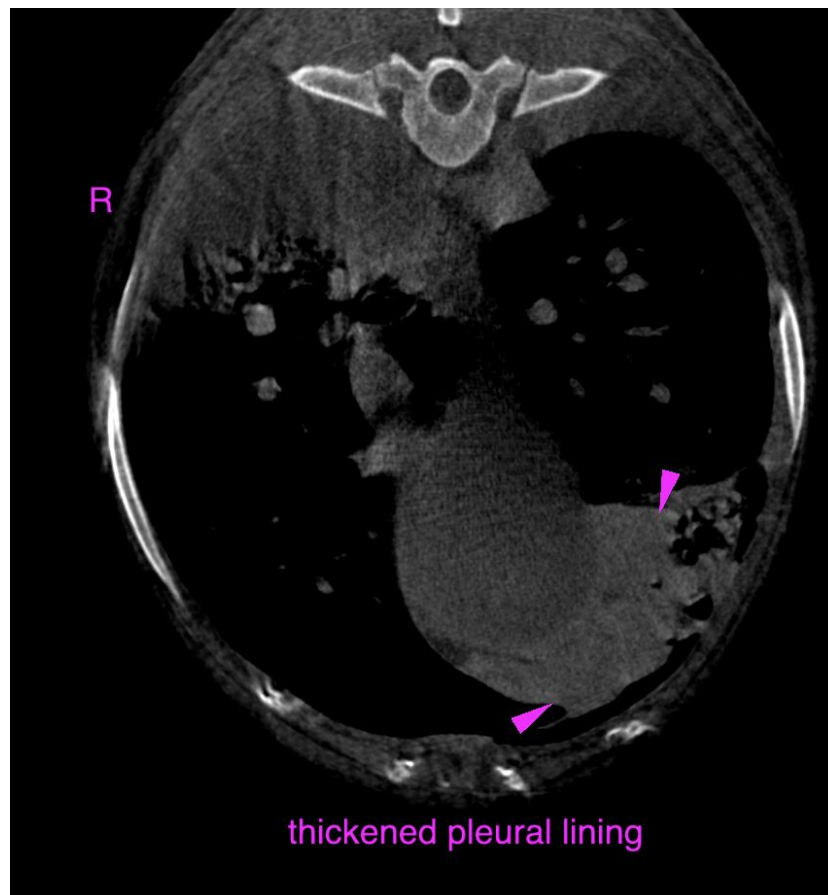
COMPUTED TOMOGRAPHIC DIAGNOSIS

- History of pleural effusion
- Moderate pleuritis
- Lymphadenopathy sternal lymph nodes
- Regions of compression atelectasis of the lung
- Normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An underlying cause for the pleural effusion cannot be specified in the current CT study of the thorax. Owing to the potential chylous character, the presumptive diagnosis is idiopathic chylothorax with secondary pleuritis. Confirming the diagnosis warrants a complete fluid analysis to differentiate against exudate of other origin (e.g. pyothorax) or transudate.

The odds for reactive hyperplasia of the sternal lymph nodes are high. Ultrasound guided FNA sampling can be tried to confirm the diagnosis.





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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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