



**PATIENT**

Boomer Manville

**PRESENTING CLINICAL SIGNS**

P presented for coughing, started 2 weeks ago, non productive dry hacking cough. Initially started when drinking water fast, now happens when P gets excited, or at random. R/O VF, kennel cough, collapsing trachea, heart disease/enlarged heart VF titer pending ref lab: CBC, Chemistries, T4, heartworm, ehrlichia

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE THORAX**

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

**BREED**

Bichon Frise

**RADIOGRAPHIC FINDINGS**

The periarticular bones of both shoulder joints present moderate osteophyte new bone formation. The right humeral head and the corresponding glenoid cavity are malformed and flattened.

**SEX**

Male Neutered

The extrathoracic soft tissues present homogeneous without abnormalities.

The caudal contour of the cardiac silhouette is steep, and the caudal cardiac waist is lost. The pulmonary vasculature is within normal limits.

**AGE**

10 Years, 2 Months

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.

**INTERPRETED BY**

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.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

**HOSPITAL NAME**

Ahwatukee Commons  
Veterinary Hospital

In the dorsal aspect of the right caudal lung lobe level with T9, an ovoid shaped, ovoid soft tissue opacification of the lung parenchyma is seen, presenting a well-defined ventral border.

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

**REFERRING VET**

Dr. Dana Nassoiy

**RADIOGRAPHIC DIAGNOSIS**

- Pulmonary soft tissue nodule/mass dorsal aspect right caudal lung lobe
- Mild left cardiac enlargement without signs of decompensation
- Suspect dysplasia right shoulder joint
- Bilateral moderate degenerative osteoarthritis shoulder joints

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a soft tissue mass, most likely located in the dorsal aspect of the right caudal lung lobe, differentials for the solitary pulmonary nodule include neoplasia (primary versus metastasis), granuloma, cyst, abscess. Theoretically a subspinal mass is a differential, but due to the position the odds are very low. Ultrasound guided FNA sampling of the mass can be tried for further definition. If surgery is considered as potential treatment option, a CT study of the thorax can be used for surgical planning and ruling out pulmonary metastatic disease (no metastasis appreciated in the radiographic study).

**DATE**

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Consider an abdominal ultrasound examination or CT study to rule out primary neoplastic



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disease with metastatic spread to the lung.

The prominent left side of the heart can indicate left cardiac volume overload and the most likely underlying cause in older small breed dog is myxomatous mitral valve degeneration – check if cardiac murmur is present. If no cardiac murmur is appreciated, the odds for cardiac disease are low.

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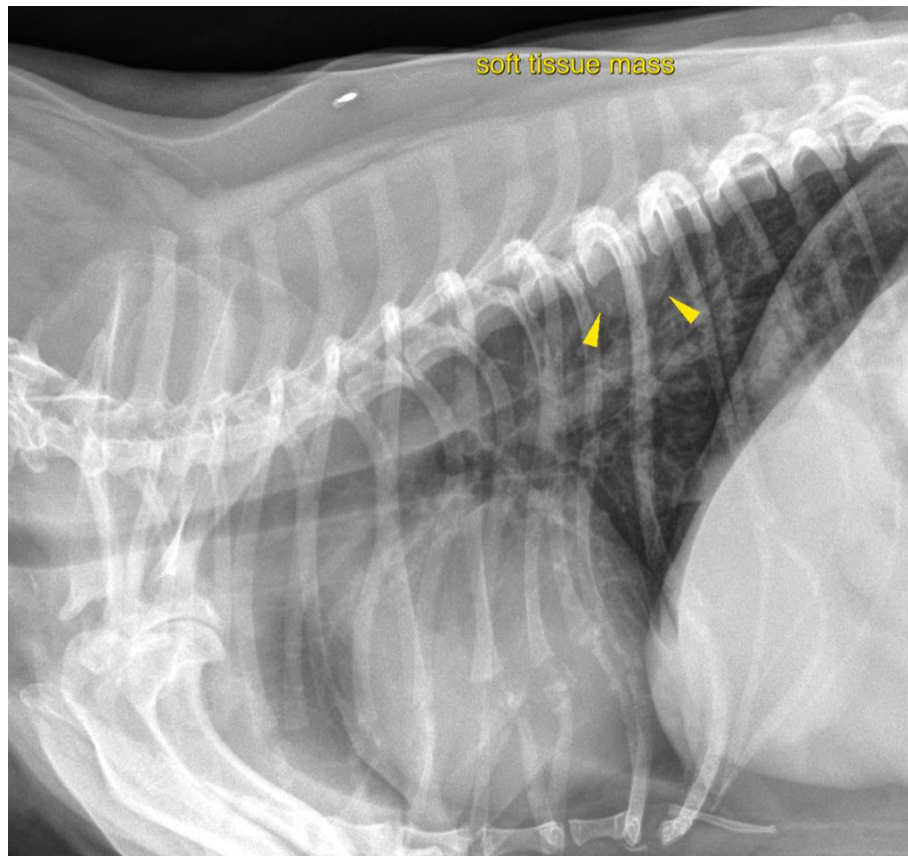
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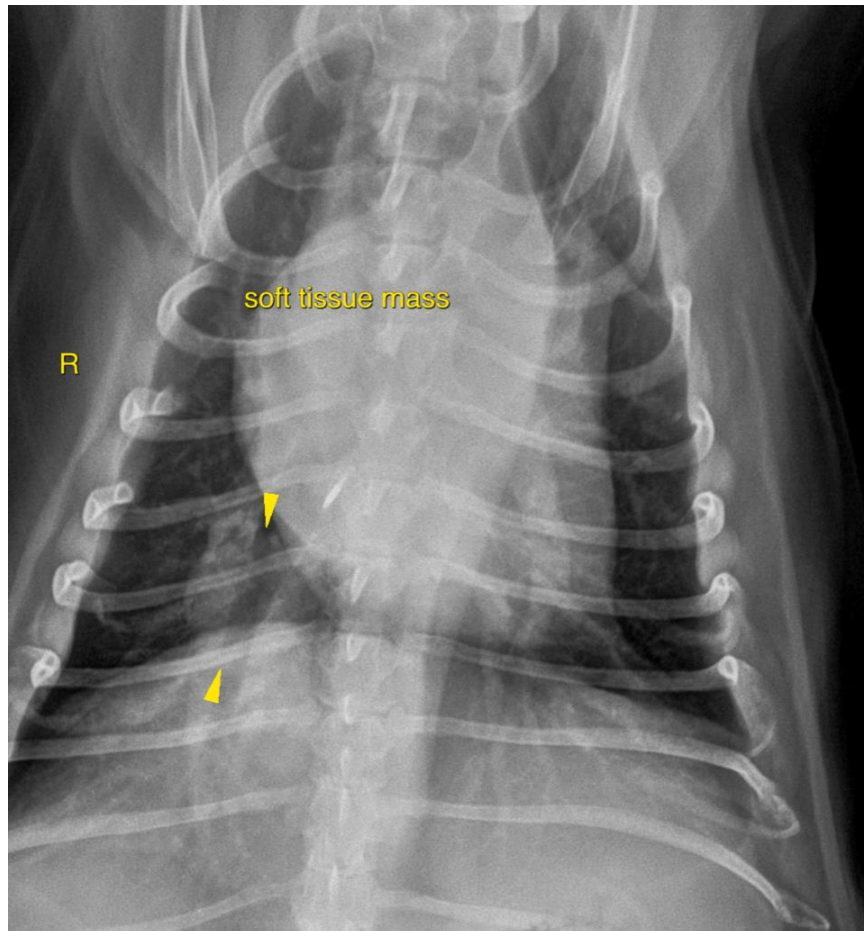
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com