



PATIENT PRESENTING CLINICAL SIGNS

Mattie Hanson P presented for senior wellness exam, has lost 10# in past 3 years. O reports p is a little slower and quieter at home, no episodes of collapse, no coughing/tachypneic episodes. Concern for neoplasia- possible splenic mass?

SPECIES Abnormal PE/Chem/CBC/UA Results: PE: mucous membranes pale pink, moist. 3/6 left apical systolic murmur, normal rate and rhythm, pulses s/s, normal lung sounds. Moderate generalized muscle wasting. Abd palpation- possible cranial organomegaly vs full stomach.
 Canine CBC/chem/proBNP/ua: moderately regenerative anemia (HCT 25%, 168K retics); mild hyperkalemia (6.1), elevated proBNP (1500, high WNL is 900), ua- usg 1.024, 1+ bilirubin; normal T4, 4dx neg, fecal neg for ova/parasites/antigen testing.

BREED RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Dashchund An overview study including the thorax and abdomen in three imaging planes is provided for review.

SEX RADIOGRAPHIC FINDINGS

S Thorax

AGE Multifocal moderate spondylosis formation is seen along the thoracic & lumbar spine. One elbow joint presents moderate osteophyte new bone formation.

17 In the subcutaneous tissue dorsal to the spinous process of T6, a small (<3 mm) mineral opaque nodule is seen.

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

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME 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.

Northshore The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

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

REFERRING VET The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

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

INVOICE Abdomen

53264 Convex shaped mineral opaque material is superimposed on the ventral aspect of the neuroforamina L2/L3 to L4/L5.

DATE No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

8-3-22 The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The hepatic volume is moderately increased the liver is protruding beyond the costal arch; the



PATIENT

gastric axis is deviated caudally. The caudoventral hepatic margins are rounded.

Mattie Hanson

The splenic head is in the anticipated position and within normal limits for size and opacity. The caudal extremity of the spleen presents a convex bulge of the ventral border.

SPECIES

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

Canine

The stomach is in its anticipated position and presents normal content.

BREED

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

Dashchund

The colon is seen in the expected position and presents with appropriate content.

RADIOGRAPHIC DIAGNOSIS

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- Suspect splenic mass
- Hepatomegaly
- Left sided cardiomegaly without signs of decompensation
- Mineralized material superimposed on the ventral aspect neuroforamen L2/L3 to L4/L5
- Degenerative osteoarthritis one elbow joint
- Small subcutaneous dystrophic mineralization dorsal to thoracic spine
- Spondylosis deformans

AGE

17

INTERPRETED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The convex bulging of the margins of the caudal extremity of the spleen is suggestive for splenic mass and potentials include benign lesion such as nodular hyperplasia, hematoma or malignant splenic neoplasia. Ultrasound can be used to confirm the diagnosis.

HOSPITAL NAME

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Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy, hepatitis or neoplastic infiltration. Ultrasound including FNA sampling can be used as minimally advanced diagnostic tests.

The most likely underlying cause for the left cardiac enlargement is underlying mitral valve insufficiency due to myxomatous mitral valve degeneration. A cardiac echo can be used for evaluation of cardiac chamber size and function.

REFERRING VET

Karla Schultz

The mineralized material superimposed on multiple neuroforamina of the lumbar spine can present lateral spondylosis formation or chronic protrusion of intervertebral disc material.

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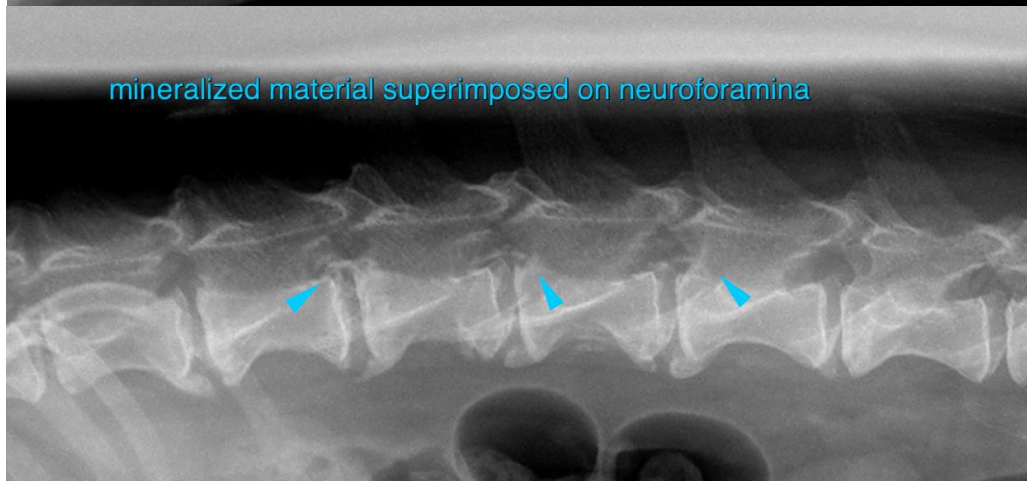
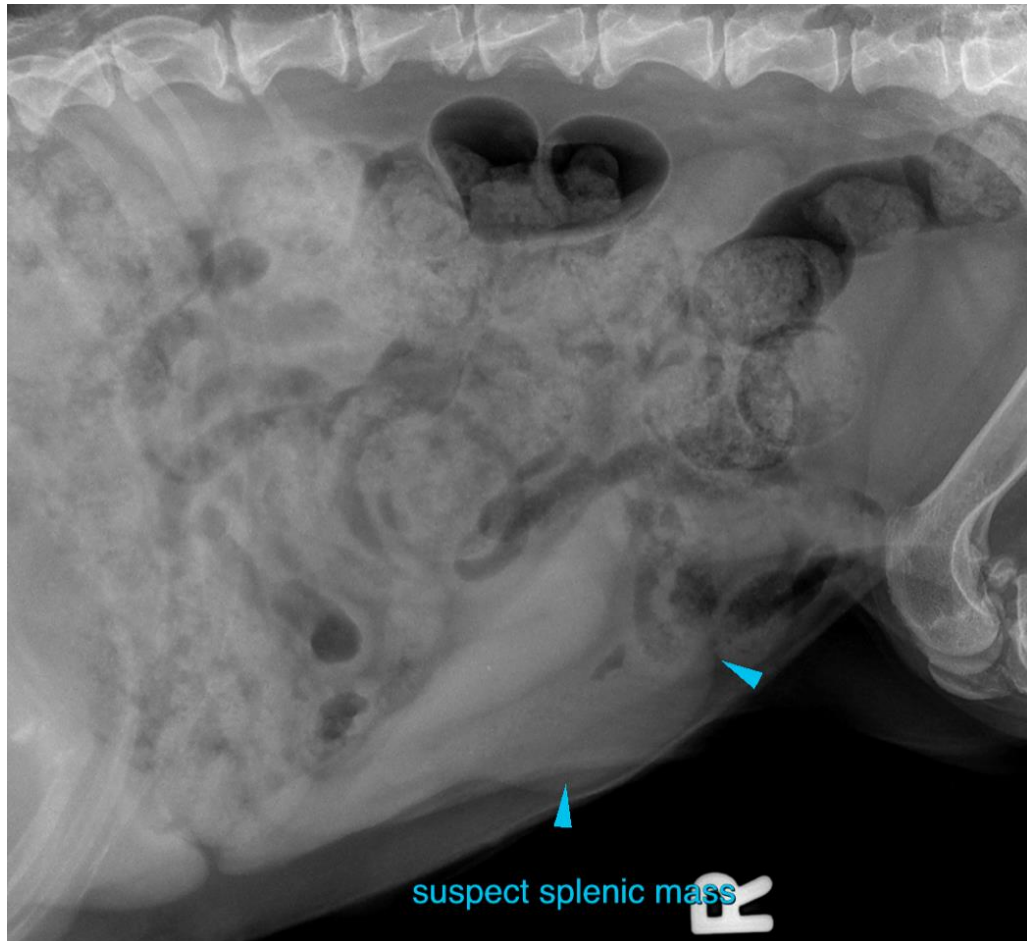
Karla Schultz

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Mattie Hanson

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.

SPECIES

Canine

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.

BREED

Dashchund

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