



**PATIENT PRESENTING CLINICAL SIGNS**

Bella Sadkhin History: coughing sometimes with blood vomiting  
Abnormal PE/Chem/CBC/UA Results:

**SPECIES RADIOGRAPHIC STUDY OF THE THORAX**

Canine A complete set of radiographs of the thorax is provided for review.

**RADIOGRAPHIC FINDINGS**

**BREED**

Bernsen Mountain

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

**SEX**

Spayed Female

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

In the left lateral view, the lung lobes present mild rounded ventral margins. The lung lobes are mildly retracted from the thoracic wall and thin pleural fissure lines are visible.

**AGE**

7 Years

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

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

The lung parenchyma presents a generalized moderate to marked unstructured reticular to reticulonodular lung pattern, effacing the peripheral pulmonary vessels.

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

**HOSPITAL NAME**

CJAH

**RADIOGRAPHIC DIAGNOSIS**

- Mild pleural effusion
- Generalized moderate to marked unstructured interstitial lung pattern

**REFERRING VET**

Dr. Gabriel

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is evidence of mild to moderate pleural effusion and transudate or exudate are potentials here. The generalized unstructured interstitial lung pattern in conjunction with the pleural effusion and history of potential hemoptysis are concerning for underlying neoplastic disease such as carcinomatosis or round cell neoplasia – no radiographic evidence of lymphadenopathy. Severe pneumonitis (e.g. fungal, Rickettsia, Leptospirosis – would affect more the caudal lung lobes), pulmonary hemorrhage, non-cardiogenic edema (e.g. pancreatitis, nephropathy, hepatic disease) are potentials. If not done so yet, recommend complete blood as well as tapping the pleural effusion as advanced diagnostic tests. If findings are inconclusive, FNA sampling of the lung or a transtracheal wash can be performed as advanced invasive tests.

**INVOICE**

13341

**DATE**

9/28/21



**PATIENT**

Bella Sadkhin

**SPECIES**

Canine

**BREED**

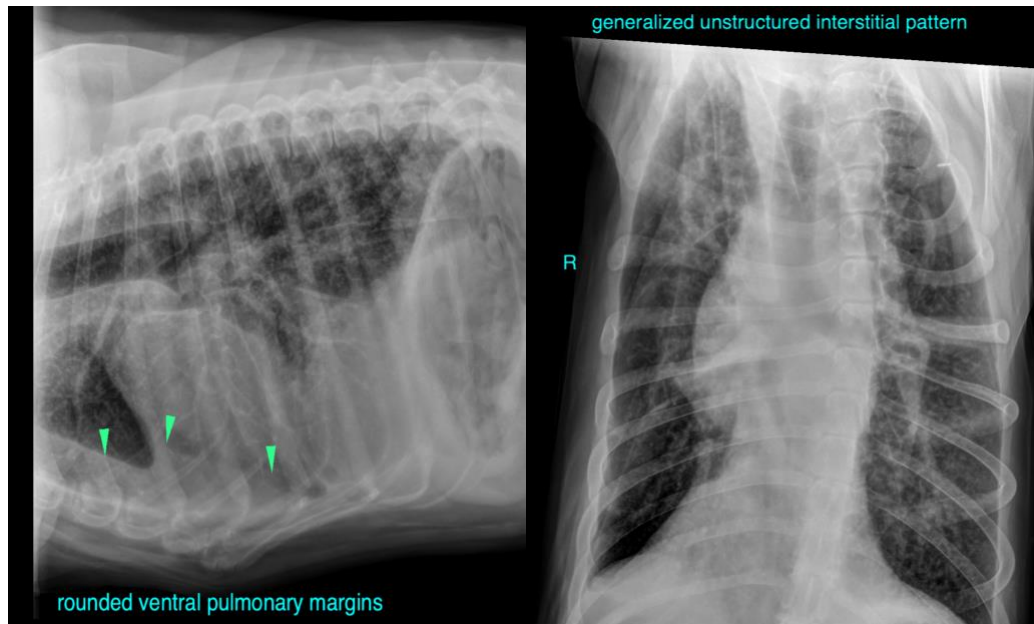
Bernsen Mountain

**SEX**

Spayed Female

**AGE**

7 Years



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

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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

**HOSPITAL NAME**

CJAH

**REFERRING VET**

Dr. Gabriel

**INVOICE**

13341

**DATE**

9/28/21