



PATIENT

Fozzie Beaupain

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

MN

AGE

7Y

WEIGHT

12.2lbs

INTERPRETED BY

Tilde Rodrigues Froes,
DMV, MSc., Dr. Med
Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

Veterinary Technicians

HOSPITAL NAME

Northshore Veterinary
Hospital

REFERRING VET

Brita Kiffney

INVOICE

74633

DATE

4-16-26

PRESENTING CLINICAL SIGNS

Seen on 4/10/ adn 4/12 at ER for vomiting, decreased appetite, and diarrhea. He has been treated with SQF, injectable maropitant, and GI meds. Is on a bland diet. His appetite and energy gave improved quite a bit

No more vomiting. He is drinking water well. Diarrhea had improved yesterday, but started up again last night with urgency to go out, mucous. No more blood in stool.

Abnormal PE/Chem/CBC/UA Results: History microvascular dysplasia (biopsy) . Labs were good at ER besides mild neutrophilia and elevated amylase/lipase Pancreatic lipase pending

RADIOGRAPHIC STUDY OF THE THORAX

Orthogonal radiographic views of the thorax were provided for review totaling 2 images, including lateral and ventrodorsal projections.

RADIOGRAPHIC FINDINGS

A focal heterogeneous soft tissue opacity is identified in the caudal mediastinal region on the lateral projection, located between the aorta and caudal vena cava, partially silhouetting with the cranial diaphragmatic margin. This structure is not clearly delineated on the ventrodorsal view.

Mild segmental gas dilation is present within the thoracic esophagus dorsal to the cardiac silhouette.

The remaining pulmonary parenchyma is unremarkable, with no evidence of focal alveolar or interstitial disease.

The trachea is normal in position and diameter.

The cardiac silhouette is within normal limits in size and contour.

Pulmonary vessels are within normal limits in size and distribution.

No evidence of pleural effusion or abnormal cranial mediastinum.

The thoracic wall and visible osseous structures are unremarkable.

The visible cranial abdomen is within normal radiographic limits.

RADIOGRAPHIC DIAGNOSIS

- The focal caudal mediastinal soft tissue opacity is most consistent with a dynamic hiatal abnormality, specifically a sliding (Type I) hiatal hernia. Other potential differential diagnosis includes gastroesophageal reflux and esophagitis, potentially correlating with the reported clinical signs.
- Otherwise, normal thorax.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings demonstrate a focal caudal mediastinal soft tissue opacity, for which the primary differential diagnosis is a sliding (Type I) hiatal hernia.



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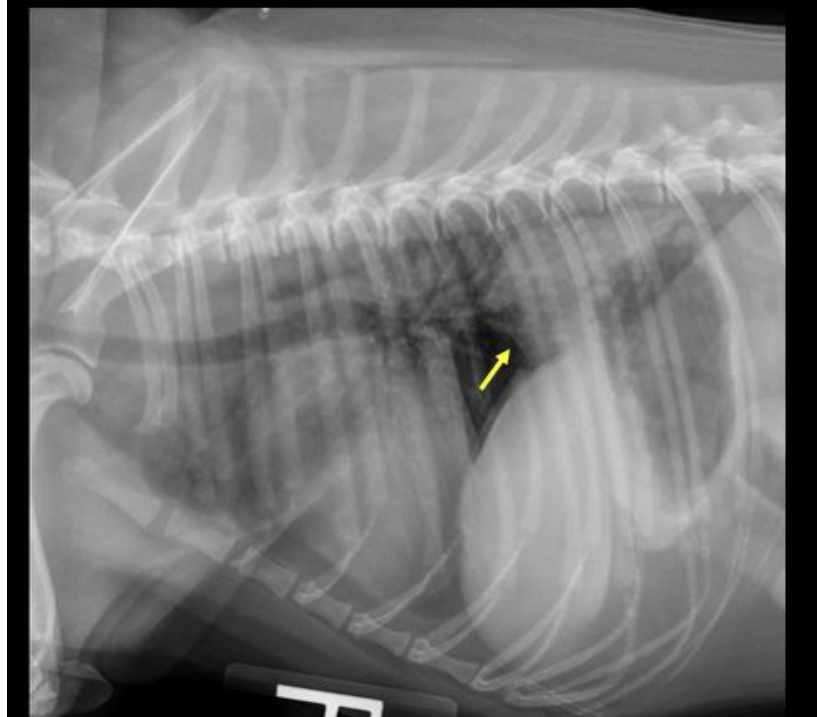
DATE

4-16-26

If clinical signs persist or worsen, further evaluation with fluoroscopic esophagram or contrast esophagram is recommended to assess dynamic esophageal function and confirm intermittent herniation.

Medical management targeting gastroesophageal reflux may be considered, based on clinical judgment.

Focal caudal mediastinal soft tissue opacity between the aorta and caudal vena cava



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.

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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info@sonopath.com