

IT'S YOUR CASE

Species: Canine

Breed: Dobermann Pinscher Sex: Female Neutered

Age: 10 years

Clinical History:

She has marked swelling of her distal left antebrachium and pain with palpation of her radius. Clinically she is suspected to have a bone tumour so screening radiographs are pursued.

Anatomic regions: Thorax

Details of study and technical comments: A three view radiographic study of the thorax are presented for interpretation.

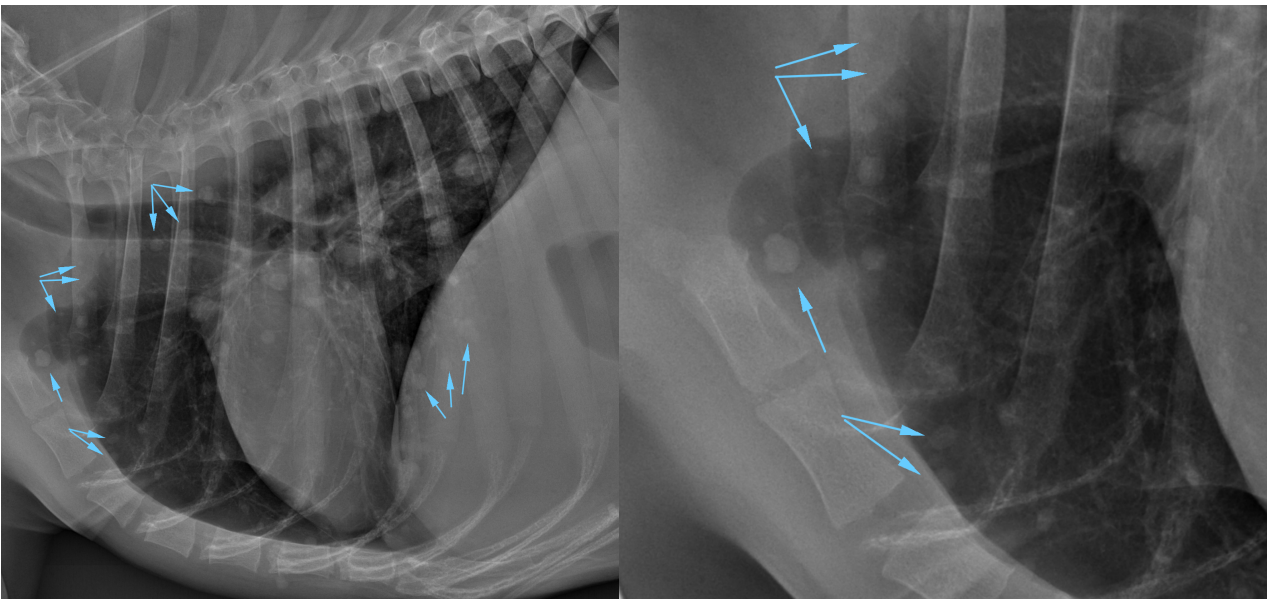
Diagnostic interpretation:

THORAX:

Multiple small (up to 2.0 cm) round soft tissue opaque nodules throughout the pulmonary parenchyma (green arrows).

The cardiac silhouette, pulmonary vasculature, mediastinal structures, pleural space, and diaphragm are normal.

The musculoskeletal structures are normal. The stomach contains a moderate volume of gas and a small volume of dependent, amorphous mineral opaque material.



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This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It has been prepared specifically for interpretation by the currently licensed and registered veterinary surgeon responsible for the care of this patient.

Conclusion:

- Soft tissue opaque pulmonary nodules likely represent metastatic neoplasia however fungal granulomas cannot be excluded if patient has an appropriate travel history.

Additional comments:

Unfortunately, there are diffusely distributed and variably sized nodules throughout the pulmonary parenchyma. With the high suspicion for osteogenic neoplasia, pulmonary metastatic neoplasia is the principal differential. Other categorical causes of nodular interstitial pattern include infectious (pyogranulomatous- fungal, etc; or parasitic) and occasionally immune mediated (eosinophilic bronchopneumopathy).

Comments about the nodular interstitial pattern:

Interstitial patterns encompass a large range of manifestations from unstructured to structured. The reason for this is that the pulmonary interstitium is comprised of alveolar wall, basement membrane, pulmonary capillary endothelium and perivascular and perilymphatics. Pathologies implicating these areas can generate disease that will be classified as interstitial pattern.

Structured interstitial pattern commonly refers to nodules which when uniformly ranging between 1-3 mm in size is called a miliary nodular pattern. Alternatively, the generic "nodular interstitial" is applied more broadly.

Nodular interstitial patterns can include neoplasia (such as metastasis), infectious (fungal, parasitic or bacterial granulomas), inflammatory or less commonly, cysts. Bullae are categorised differently. Miliary interstitial patterns have a stronger association with specific fungal and metastatic neoplasms although these are not exclusive.



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