



IT'S YOUR CASE

Species: Canine Breed: Anatolian Shepherd Dog Sex: Female Entire Age: 1 year

Clinical History:

Patient presented for suspected animal attack suffering significant lacerations to the ventral neck region. The injury occurred sometime between 1 and 8 hours prior to presentation. There was a large amount of blood where patient was found. She has been nursing a litter of seven-week-old puppies in the process of weaning. Patient is maintained on calcium supplementation. Client reported their male dog was killed last week via an attack through the fence.

Anatomic regions: Thorax

Details of study and technical comments:

Right and left lateral and VD use of the neck. Only the most cranial part of the thorax is included in the study.

Diagnostic interpretation:

Large wound defects are seen along the ventral cervical region (red arrows).

On the right lateral view, a focal discontinuity of the ventral tracheal wall (6 mm) is seen (yellow arrows). From this point, cranially and caudally, fine linear air lucency extends along the ventral border of the cervical trachea (green arrowheads). The trachea is however even in diameter, normal in position.

There is mild heterogeneity of the cranial mediastinum (blue arrows). The cranial thorax seems within normal variations.

The skeletal structures are within normal variations.

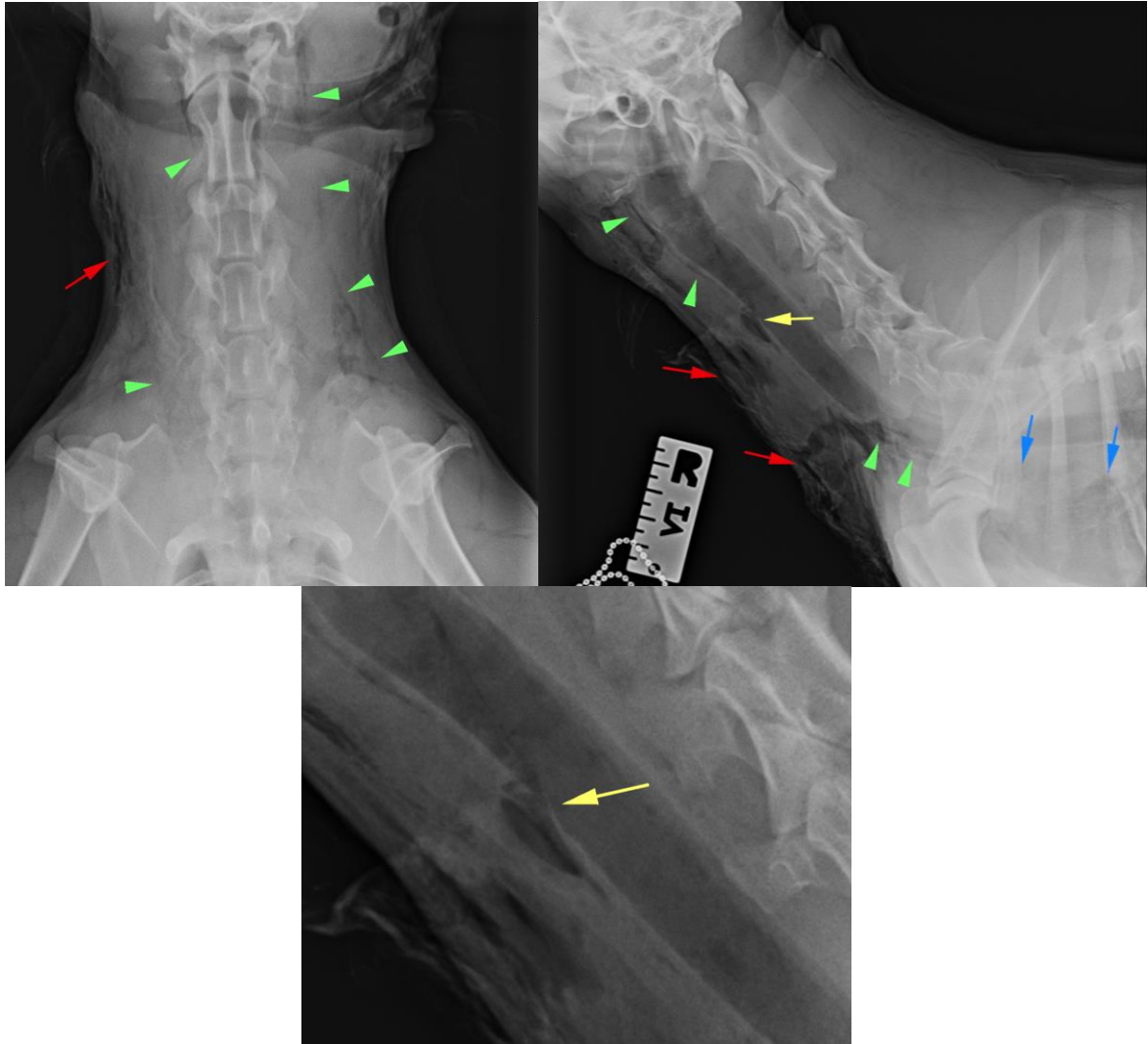


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This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It must therefore only be interpreted by a currently licensed and registered veterinary surgeon responsible for the care of this patient.



Conclusions:

- Strong suspicion of ventral tracheal injury in the cranial to mid cervical region. Possible secondary peri tracheal gas leaking. Consider the potential for valve.
- Multiple severe wound defects in the ventral cervical region.
- Mild pneumomediastinum

Additional comments:

Tracheoscopy would be valuable to assess the mural integrity of the trachea. Injuries of the major blood vessels in the cervical area are possible but require wound exploration for further evaluation. Alternatively, vessels can be traced gingerly with Doppler ultrasound.



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