



VETCT
CONSULTANTS IN TELEMEDICINE

IT'S YOUR CASE

Species: Canine Breed: Boxer Sex: Male Neutered Age: 8 years

Clinical History:

Severe thrombocytopenia, checking for metastasis as underlying cause.

Details of study and technical comments: 3 view thoracic radiographs (5 films) dated May 9 are provided for interpretation.



Reported by VetCT

t. +44 (0)1223 422251 **w.** www.vet-ct.com **e.** info@vet-ct.com

Co Number 6955449 Registered Office St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220 Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia

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.

Diagnostic interpretation:

The lungs are mildly hypoinflated. The heart has normal size, shape, and position. The mediastinal structures are unremarkable. The lungs exhibit normal bronchial and vascular markings without evidence of soft tissue nodule or consolidation. On the right lateral view, superimposed on the 3rd rib, there is a 0.35cm ill defined nodule with a central gas opacity, most likely a summation. Multifocally in the lungs there are tiny (< 0.15 cm) mineral opaque foci (= osteomas). On the ventral aspect of a few vertebra there is very minimal bridging new bone formation, the skeletal features are otherwise unremarkable. The portion of the cranial abdomen included in the study presents questionable small liver characterized by mild cranial displacement of the gastric axis (red line = gastric axis, normal is parallel to ribs or perpendicular to vertebral column).

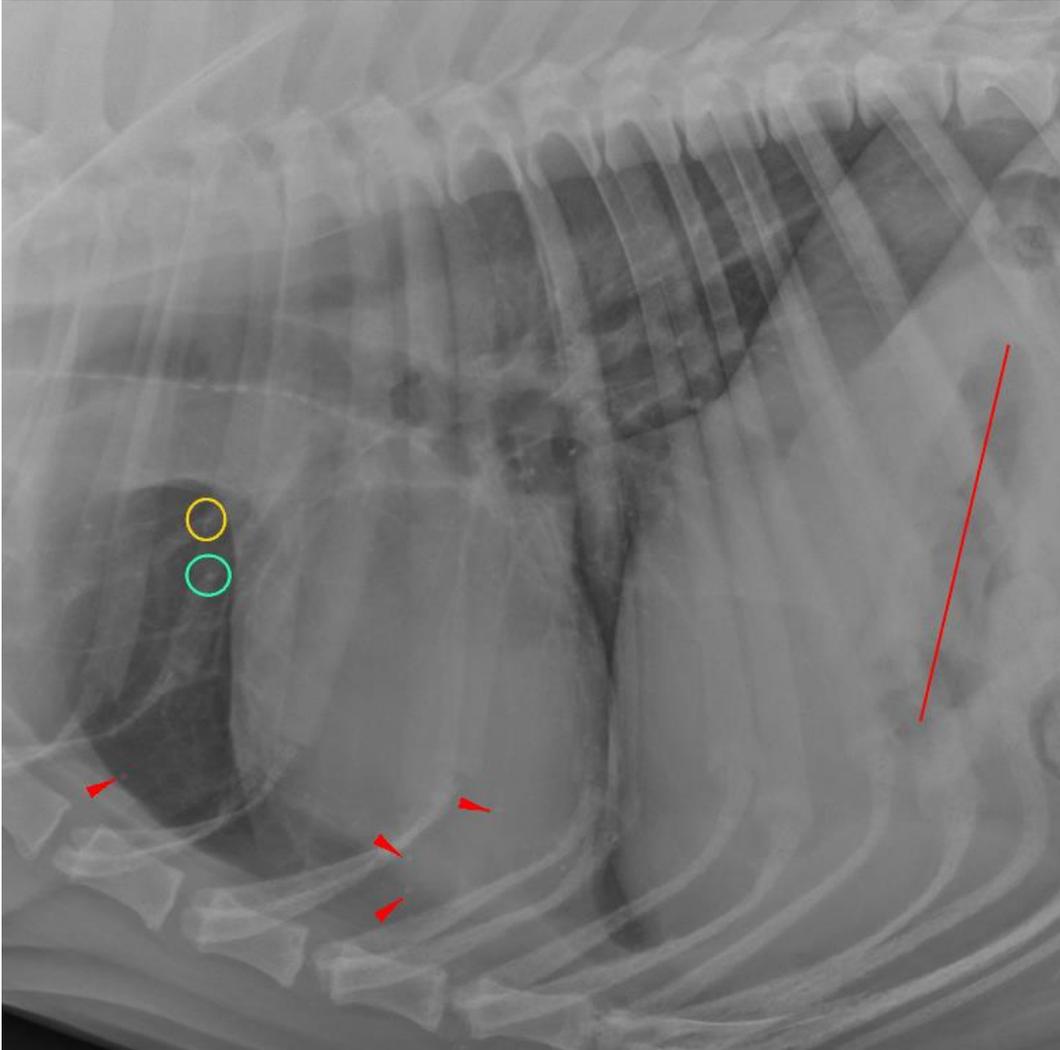


Figure 1. Multiple osteomas are noted (red arrow heads) as an incidental finding. These are differentiated from end on pulmonary blood vessels (circled) by their location being peripheral in the lung, and the fact that they do not align with a longitudinal pulmonary blood vessel.

Conclusions:

1. Normal thoracic radiographs
2. Incidental ossifying pulmonary metaplasia (osteomas)
3. Questionably small liver vs normal conformation in deep chested dog



Reported by VetCT

t. +44 (0)1223 422251 www.vet-ct.com e. info@vet-ct.com

Co Number 6955449 Registered Office St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220 Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia

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.

Additional comments:

An underlying cause of thrombocytopenia is not identified. There is no evidence of pulmonary mass or soft tissue nodules.



Reported by VetCT

t. +44 (0)1223 422251 **www.vet-ct.com** **e.** info@vet-ct.com

Co Number 6955449 Registered Office St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK

ABN 24601862220 Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia

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.