



PATIENT PRESENTING CLINICAL SIGNS

Tessa MacKay Adrenal masses noted in previous ultrasound done a few weeks ago. elevated kidney and liver values. P overweight and seems ravenous
 Abnormal PE/Chem/CBC/UA Results: Adrenal masses noted in previous ultrasound done a few weeks ago. elevated kidney and liver values. P overweight and seems ravenous

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Plain and post contrast studies of the thorax and abdomen available for review.

BREED

Pom

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

SEX

FS

A 22 x 18mm sized irregular shaped mass of the right adrenal gland is seen. The mass presents multifocal internal mineralization and cavitation with strong heterogeneous contrast enhancement. Stalk-like extension of the mass into the right phrenicoabdominal vein is seen. At this time, there is no evidence of invasion of the lumen of the caudal vena cava. The left adrenal gland presents within normal limits.

AGE

11 Years

Moderate generalized enlargement of the liver with rounded lobar margins and diffuse heterogeneous enhancement is noted.

The gallbladder presents within normal limits.

The spleen and kidneys present within age related normal limits.

A small subcutaneous nodule is seen in the soft tissues to the right of the pelvis. A small subcutaneous soft tissue nodule is seen in the soft tissues to the left of the pelvis as well.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

HOSPITAL NAME

Green Dog Dental and
 Wellness

There is an asymmetric lumbosacral transitional vertebra.

The patient is obese.

Thorax

REFERRING VET

Garcia

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

INVOICE

56139

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Moderate to severe cervical and thoracic tracheal collapse are seen.

DATE

1-11-23

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.



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The lung parenchyma presents the expected architecture and attenuation behavior. There is no evidence of pulmonary metastases.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

SPECIES

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mineralizing right adrenal gland mass meeting neoplastic and malignancy criteria.
- Hepatomegaly with signs of diffuse parenchymal disease.
- Signs of dynamic tracheal disease.
- Congenital asymmetric transitional vertebra – incidental finding.
- Subcutaneous nodules.
- Obesity.

SEX

FS

AGE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms presence of a right adrenal gland mass. The CT findings do suggest potential for malignancy by means of invasion of the right phrenicoabdominal vein. Functional or nonfunctional adenocarcinoma is considered a primary differential diagnosis. Adenoma, pheochromocytoma, metastases, incidentaloma cannot be ruled out entirely but are thought less likely. Correlate with the laboratory values. At this time, there is no evidence of invasion of the caudal vena cava and surgical excision should be feasible.

The findings of the liver may represent endocrine, metabolic, or vacuolar hepatopathy. Diffuse neoplastic infiltrate or metastases cannot be ruled out entirely. Parenchymal sampling and correlation with the laboratory values recommended for further definition.

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com