



PATIENT

Captain Franklin

PRESENTING CLINICAL SIGNS

Hyporexia and weight loss, palpable abdominal mass.
Abnormal PE/Chem/CBC/UA Results: GGT 12, HCT 33

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Plain and post contrast studies available for review.

BREED

West Highland White Terrier

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

A large irregular shaped and expansile cavitating mass is emerging from the right division of the liver. The mass appears to involve most of the right lateral and part of the caudate liver lobe. Total measurements of the mass are 13 x 10 x 9 cm approximately. The mass presents reduced heterogeneous enhancement compared with the remainder of the liver parenchyma. Multiple superficial anastomoses are seen in the region of the mass. The mass causes a severe mass effect in the cranial and mid abdomen with leftward deviation of the gastric outlet, descending duodenum, and medial as well as dorsal deviation of the portal vein and caudal vena cava respectively. The right kidney is pushed dorsally. No direct interference with the portal vein and common bile duct is seen. The remainder of the liver parenchyma presents within normal limits.

SEX

Male Castrated

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

AGE

12 Years

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The adrenal glands are within normal limits for size, shape and organ architecture.

HOSPITAL NAME

CARE Surgery Center

Mild generalized splenic enlargement with multiple faintly hypoenhancing splenic nodules is seen.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

REFERRING VET

Bleakley

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

INVOICE

56190

Thorax

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

DATE

1-16-23

The sternal lymph nodes present moderate enlargement measuring 12 x 13mm approximately.

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

The bronchial tree presents with regular branching and tapers uniformly towards the periphery

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as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior. No evidence of interstitial pulmonary nodules or masses is seen.

SPECIES

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

BREEDWest Highland White
Terrier**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Large right divisional liver mass meeting neoplastic criteria.
- Splenic nodules.
- Sternal lymphadenomegaly.

SEX

Male Castrated

The CT study reveals a large right divisional liver mass meeting neoplastic criteria. Differential diagnosis includes primary neoplasia of the liver such as hepatocellular carcinoma, adenoma, and hepatoma. Secondary neoplasia of the liver including sarcoma and round cell neoplasia cannot be ruled out entirely but appears less likely. Anatomic interference with portal vein, common bile duct, and other critical structures in the portal hilus is a common complication in right divisional liver masses and may impair the surgical access. No direct involvement, adhesion, or infiltration of these structures is noted in the CT study. The remainder of the liver parenchyma presents no structural changes.

AGE

12 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**INTERPRETED BY**Nele Eley, DVM
Dr. med. Vet. DipECVDI

The splenic nodules may well represent extramedullary hematopoiesis or benign nodular hyperplasia. Metastatic disease cannot be ruled out. FNA, biopsy, or splenectomy could be considered.

The sternal lymphadenomegaly may represent reactive hyperplasia or metastatic disease. Ultrasound guided FNA could be considered for further definition. The sternal lymph nodes drain part of the cranial abdomen.

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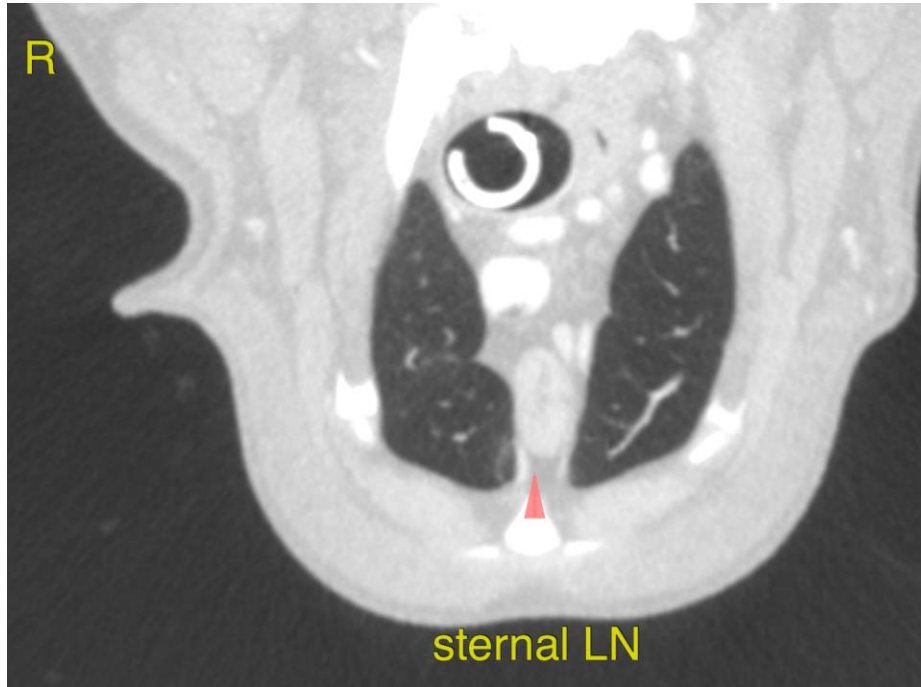
Bleakley

INVOICE

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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.

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