



PATIENT

Preacher Mason

PRESENTING CLINICAL SIGNS

Presented for lameness on right front and lethargy. On x-ray hepatomegaly. Abdominal ultrasound reveal large liver mass concern vessels involvement . Ct for evaluation if is surgical eligible.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Elevated ALKP, Amyl and ALT. 4 dx positive to Anaplasma

BREED

Labrador Retriever

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies available for review.

SEX

MN

AGE

8 Years

COMPUTED TOMOGRAPHIC FINDINGS

An irregular shaped, ill-defined, cavitating mass of the right division of the liver is seen. The mass occupies most of the right cranial abdomen and measures approximately 14 cm in diameter. Multiple contrast sparing fluid attenuating areas are seen within the mass. The enhancement of the mass is moderate and heterogeneous. The caudate lobe and right lateral liver lobe appear to be occupied by the mass. The right medial liver lobe and gallbladder are deviated medially. Medial and ventral deviation of the descending colon and common bile duct are seen as well. The mass appears to be in direct contact with the duodenal wall and common bile duct wall. No evidence of nodules or masses is seen within the left division of the liver.

No evidence of common bile duct dilation is noted. The gallbladder is moderately distended.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The stomach is postprandial and deviated towards the left side.

Part of the spleen is not included in the field of view. The visible splenic parenchyma presents within normal limits.

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The right kidney presents within normal limits. The left kidney is not fully included but no abnormality is seen in the visible cranial segment of the left kidney.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large cavitated right divisional liver mass meeting neoplastic criteria with mass effect onto the descending duodenum and common bile duct.

REFERRING VET

Dr Mary Wallace

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

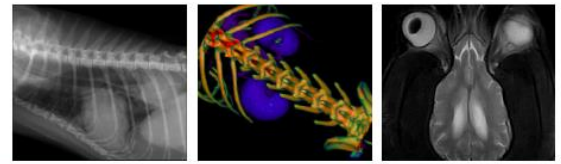
The CT study reveals a large cavitated right divisional liver mass. Lobar origin from the caudate and/or right lateral liver lobe is considered likely. There is interference with the descending duodenum and common bile duct due to the extensive size of the liver mass. No direct infiltration of these structures can be observed. The size of the mass and the anatomic extension into the area of the portal hilus however may pose limitations to the surgical resectability of the mass. Invasion of the caudal vena cava or other vascular invasion is not seen. Hepatocellular carcinoma is a primary differential diagnosis. Secondary neoplasia of the liver including sarcoma, round cell neoplasia, and hepatoma are potential differential diagnoses too but considered less likely.

INVOICE

55936

DATE

1-2-23



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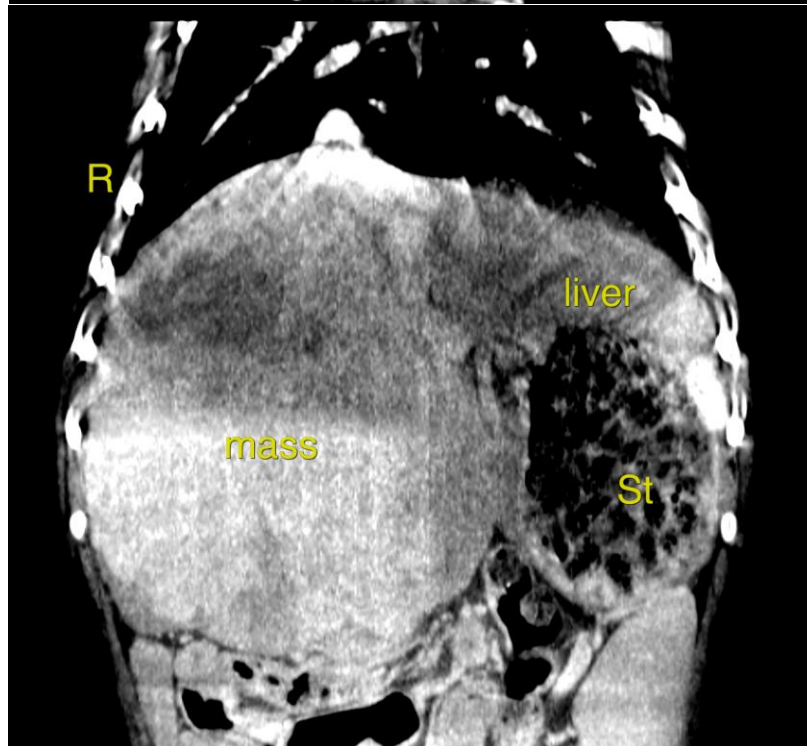
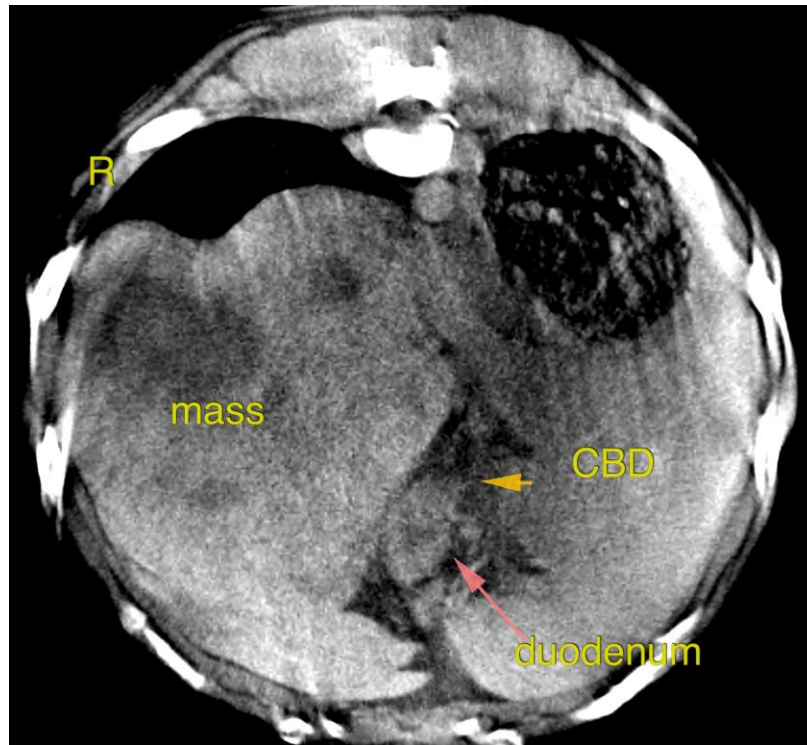
Dr Mary Wallace

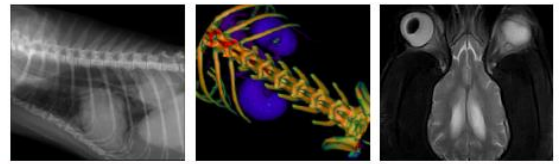
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Labrador Retriever

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