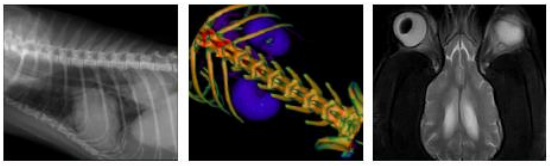
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Sylvester McGuire

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Scottsdale Veterinary Clinic

REFERRING VET

Dr. Hertz

INVOICE

56301

DATE

1-21-23

PRESENTING CLINICAL SIGNS

Ultrasound revealed 4.5cmx4cm cavitated hepatic mass taking up the majority of the caudate and some of the right lateral liver lobe. The mass is large enough that it appears to be causing partial occlusion of the biliary tree. Mild distension of the gall bladder and main bile duct, duct does not appear to be fully occluded.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals an irregular shaped and ill-defined soft tissue attenuating mass with multifocal mineralizations of approximately 6.5 x 5 x 4.5 cm in the dorsocranial abdomen. Most of the mass is to the right of the midline. The mass appears to emerge from the positions of the left and right adrenal glands. The adrenal glands cannot be seen separate from the mass. The mass is ventral of the abdominal aorta and dorsal to the caudal vena cava. Invasion and expansion of the right renal vein is seen.

The liver presents within normal limits for position, size, shape, attenuation, and enhancement, except for the mass effect of the aforementioned mineralizing mass in the craniodorsal abdomen onto the caudate and right lateral liver lobes.

The gallbladder is moderately distended and thin walled. No abnormal content is seen.

Mild dilation of the extrahepatic biliary ducts is noted. There is no evidence of common bile duct dilation. The duodenal papilla presents within normal limits.

Both kidneys are irregular in shape with multiple cortical infarcts and mineral attenuating material within the renal diverticuli.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large craniodorsal abdominal soft tissue mass with multiple mineralizations and vascular invasion meeting neoplastic criteria – with presumed origin of the adrenal glands.
- Mild extra- and intra-hepatic biliary duct dilation – suspect cholangitis/cholangiohepatitis.
- Bilateral chronic hypercalcemic nephropathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The adrenal glands are the most likely organ of origin of the craniodorsal abdominal mass. The adrenal glands cannot be seen separate from the mass. The mass presents evidence of infiltrative growth and vascular invasion which indicates malignancy. Adenocarcinoma of the adrenal glands appears to be a primary differential diagnosis. Pheochromocytoma and other mass including carcinoma are potential but less likely differential diagnoses. The resectability of the mass is limited by its vascular invasion. However, at this point, caudal vena cava invasion is not directly seen, and the mass may be resectable if concurrent right nephrectomy is considered.

SonoPath Teleradiology
EDUCATIONAL TELECONSULTATION SERVICES™
SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Sylvester McGuire

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Scottsdale Veterinary Clinic

REFERRING VET

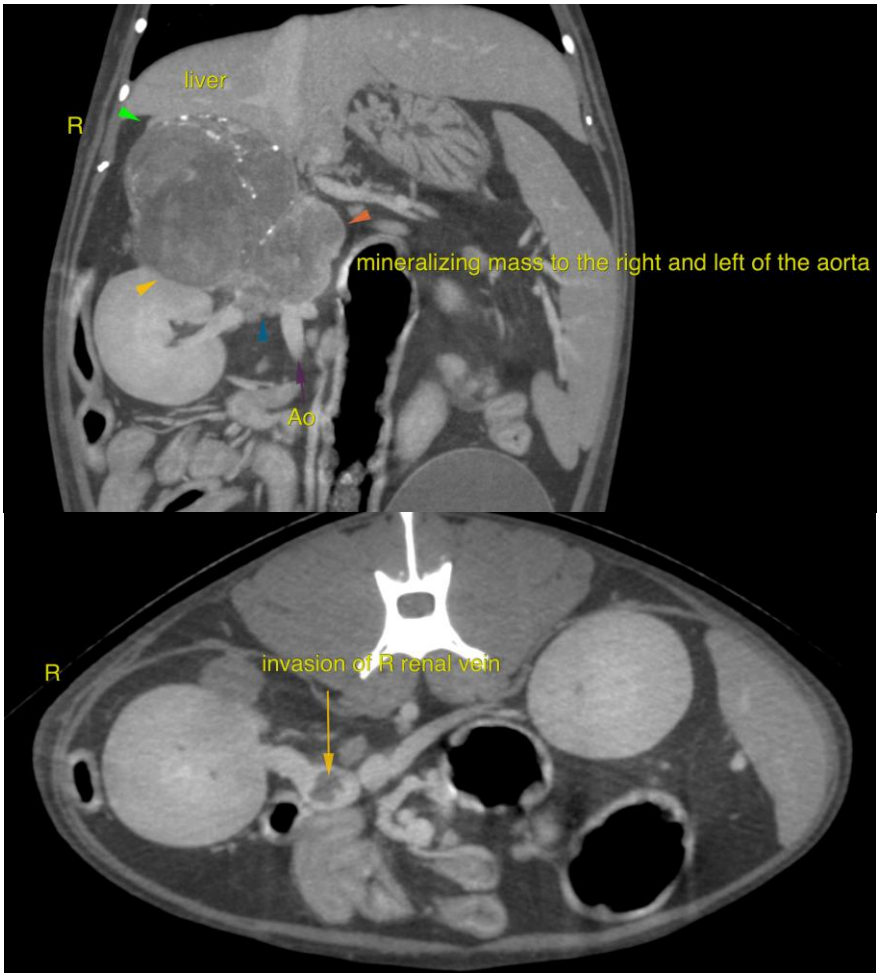
Dr. Hertz

INVOICE

56301

DATE

1-21-23



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