


PATIENT PRESENTING CLINICAL SIGNS

Buster Dyal Lethargy and excessive panting. Lack of appetite, thirst and refusing to take meds. Vestibular signs. Abnormal PE/Chem/CBC/UA Results: Head tilt to the Left, pet will walk to the Left side. Calculus and gingivitis present.

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX & ABDOMEN

Canine Plain and post-contrast studies of the head and abdomen and post-contrast study of the thorax provided for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

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

SEX

Neutered Male An approximately 3.0 cm sized, irregular shaped, ill-defined and heterogeneously enhancing, expansile mass is arising from the medial and caudal aspect of the left lateral liver lobe. Multiple additional variably enhancing nodules and masses are seen throughout the liver. The gallbladder is moderately distended. Multiple small calculi are seen within the gallbladder.

AGE

10 Years A 2.5 cm sized, heterogeneously enhancing, expansile mass is arising from the splenic tail. Multiple variably enhancing and variably sized nodules are seen throughout the remainder of the spleen.

Cortical renal infarcts are seen in both kidneys.

INTERPRETED BY

Nele Eley (Ondreka),
 DVM Dr. med. vet.,
 DipECVDI

Focal mineralization is seen within the left anal sac.

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

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

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

Thorax

Vacuum phenomenon of the T13/L1 intervertebral disc is seen.

REFERRING VET

Dr. Meaux

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 is uniform and considered within normal limits.

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Moderate tracheal collapse is noted.

The left atrium appears to be mildly enlarged when compared with the aorta.

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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.



PATIENT The lung parenchyma presents the expected architecture and attenuation behavior.

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

SPECIES *Head*
Canine A mild amount of fluid attenuating material and mild mucosal swelling is seen within both nasal cavities, left more than right.

BREED Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Morkie The tympanic bullae are aerated, the mucosal lining is not seen and the bony wall is smooth and thin. The external ear canals are within normal limits.

SEX The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.
Neutered Male

AGE The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio of < 0.5. The attenuation and contrast enhancement pattern is uniform.

10 Years **COMPUTED TOMOGRAPHIC DIAGNOSIS**

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- Large liver mass meeting neoplastic criteria and multiple liver nodules
- Large splenic mass meeting neoplastic criteria and multiple splenic nodules
- No structural evidence of brain pathology
- Normal middle and inner ear presentation
- Mild bilateral rhinitis
- Bilateral cortical renal infarcts
- Tracheal prolapse
- Presumed left atrial enlargement – most likely myxomatous mitral valve degeneration

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INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Large hepatic and splenic masses meeting neoplastic criteria are present. The remainder of the hepatic and splenic parenchyma is interspersed with multiple nodules meeting neoplastic criteria as well. Benign neoplasia is thought unlikely based on the CT findings. Consider metastasizing hemangiosarcoma as well as hepatocellular carcinoma or other neoplasia. Final diagnosis would require sampling for histology, which may be challenging, as false negatives are common and a significant risk of inducing tumor hemorrhage may exist. The liver mass/nodules are consider non-resectable.

REFERRING VET

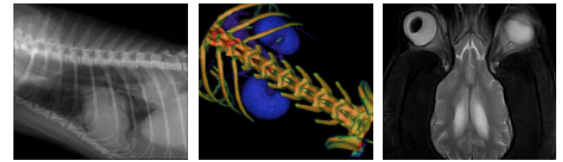
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PATIENT

Buster Dyal

SPECIES

Canine

BREED

Morkie

SEX

Neutered Male

AGE

10 Years

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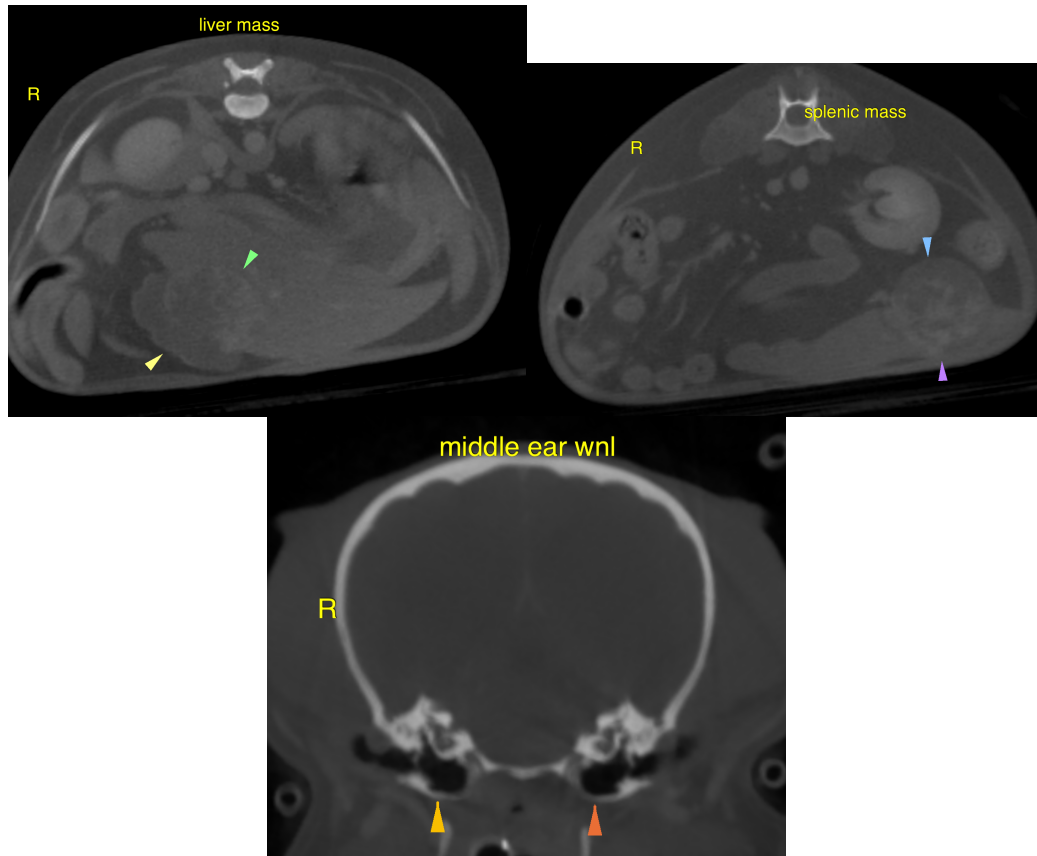
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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