



PATIENT

Minou Durand

PRESENTING CLINICAL SIGNS

Adenocarcinoma of intestines, anastomosis was performed with mass removal 6/9/2021 MET CHECK/SURGICAL PLANNING
Abnormal PE/Chem/CBC/UA Results: CBC --- mild leucopenia CHEM --- unremarkable

SPECIES

Canine

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

BREED

Mixed Medium Breed

Patient has a history of intestinal anastomoses in the ileocecal region because of intestinal adenocarcinoma.

No evidence of pneumoperitoneum is seen. There is no evidence of peritonitis.

SEX

Minimal regional fat stranding is seen in the cranial and right free abdomen which appears to be rather associated with the pancreas than the intestine.

SF

The wall of the distal ileum presents mild circumferential thickening with indiscernible wall layers. No evidence of ileus, mass lesions, or regional peritonitis is seen.

AGE

9 Years

There is mild enlargement of the ileocecolic lymph nodes with maintained short to long axis ratios and maintained contrast enhancement patterns. The colic and jejunal lymph nodes are minimally prominent.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

No additional gastrointestinal mass lesions are identified.

The pancreas presents mild generalized enlargement with the aforementioned mild regional fat stranding.

HOSPITAL NAME

Veterinary Image
Center

Short linear metal wire/clips are seen in the right cranial free abdomen.

Small hypoenhancing nodules are present within both adrenal glands.

Small cortical cystic lesions are seen in both kidneys. Size and general architecture of both kidneys are considered within normal limits.

REFERRING VET

Dr. A. Marzan, DVM

There is mild generalized enlargement of the spleen with diffuse heterogeneous enhancement.

The urinary bladder is moderately distended. Mild generalized wall thickening with mild roughening of the luminal surface is noted.

INVOICE

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Both coxofemoral joints present mild osteoarthritic changes.

Moderate degenerative lumbosacral stenosis and moderate L2/3 spondylosis is present.

The mamils are prominent.

DATE

10-15-21

Thorax

Tortuous course, thickening, and multifocal luminal mineralization is seen within the 1st, 2nd, and



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3rd order pulmonary arteries accentuating the caudal lung lobes. Contrast void is noted on the post-contrast study within the pulmonary arteries. The main pulmonary artery appears to be wider in diameter when compared with the aortic root.

The lung presents a mild generalized bronchial pattern.

SPECIES

Canine

COMPUTED TOMOGRAPHIC DIAGNOSIS

BREED

Mixed Medium Breed

- No evidence of gastrointestinal mass lesions.
- History of distal ileum anastomosis with presumed scar tissue formation - recurring adenocarcinoma cannot be ruled out entirely.
- Pancreatitis with mild regional peritonitis.
- Ileoceocolic lymphadenomegaly.
- Adrenal nodules
- Cortical renal cysts.
- Splenopathy with patchy enhancement.
- Vascular lung pattern with arterial enlargement and obstructive mineralizations.
- Main pulmonary artery enlargement.
- Degenerative lumbosacral stenosis.
- Spondylosis.
- Coxofemoral osteoarthritis.

SEX

SF

AGE

9 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

No direct evidence for intestinal tumor recurrence is noted on the CT study of the abdomen. The wall changes in the distal ileum are compatible with the history of anastomosis and scar tissue formation; however, early tumor recurrence can never be ruled out entirely. Consider ultrasonographic monitoring with a recheck ultrasound in 2-4 weeks.

HOSPITAL NAME

Veterinary Image
Center

The regional lymphadenomegaly is compatible with reactive hyperplasia. Early metastatic disease cannot be ruled out entirely.

REFERRING VET

Dr. A. Marzan, DVM

Consider myelolipomas and other incidentaloma a potential for the adrenal changes; however, early functional / nonfunctional adenoma, adenocarcinoma, and hyperplasia cannot be ruled out entirely. Correlate with the laboratory values.

The splenic changes are suggestive for nodular hyperplasia and congestion under general anesthesia/ extramedullary hematopoiesis. Metastatic disease is thought unlikely.

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The findings of the thorax suggest pulmonary hypertension with mineralizing engorgement of the 1st to 3rd order pulmonary arteries. Differential diagnosis includes parasitic disease such as heartworm infection, atherosclerosis, or pulmonic thromboembolism with mineralizing thrombi. Depending on the clinical context and patient history, further definition by means of a cardiac echo could be considered in order to rule out presence of significant hypertension.

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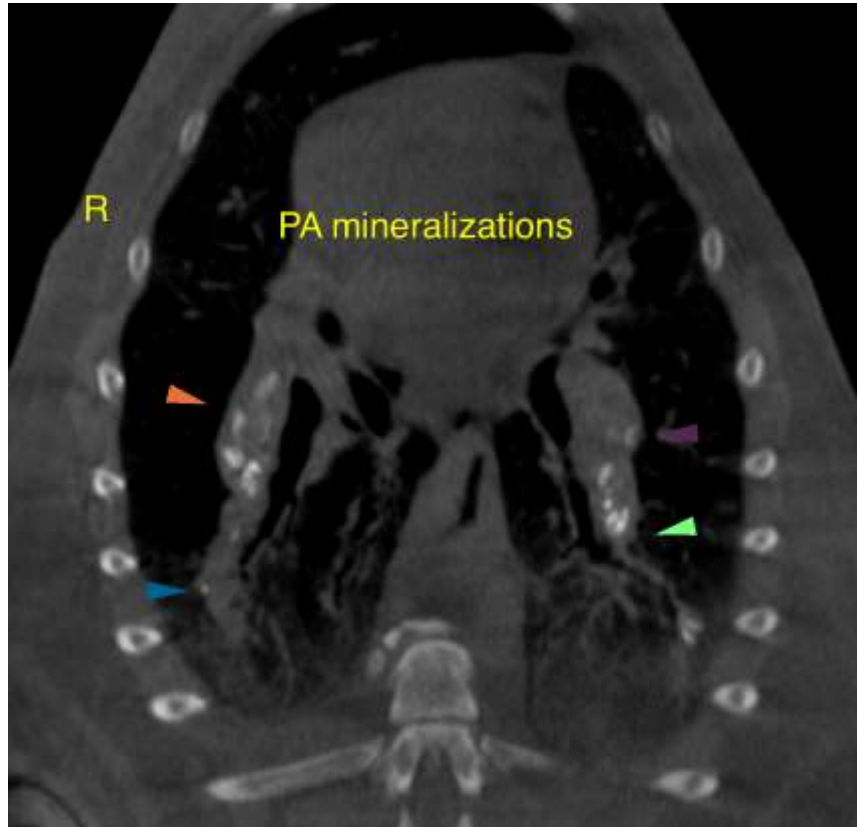
SF

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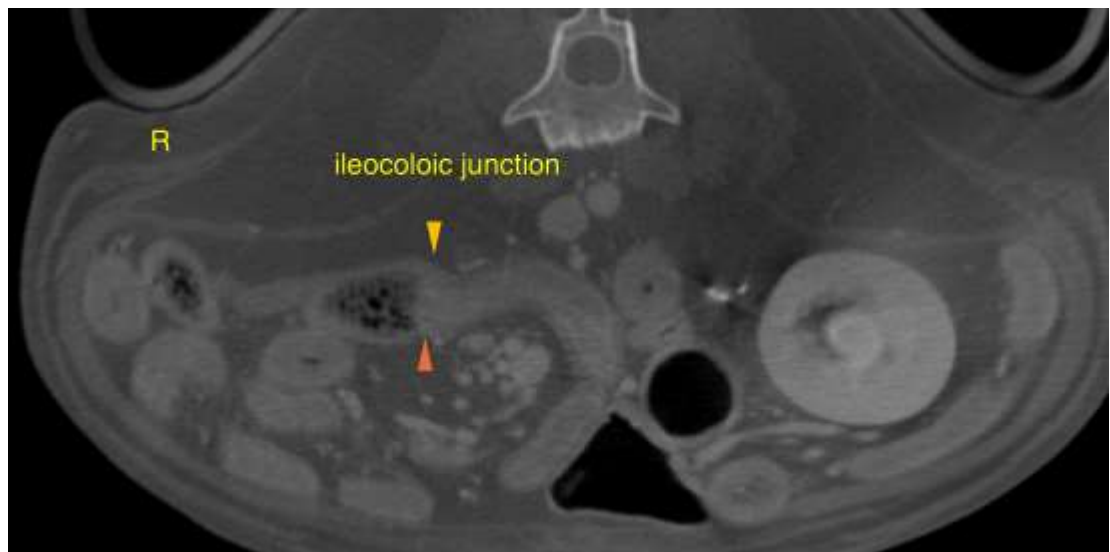
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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

Mixed Medium Breed

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