



PATIENT

Sadie Wolfe

PRESENTING CLINICAL SIGNS

Presented for a suspected abdominal mass. Suspected hepatic mass on ultrasound. hx of chronic anal gland issues. recently has been polyphagic.
Abnormal PE/Chem/CBC/UA Results: normal

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Plain and post contrast studies of the abdomen and post contrast study of the thorax available for review.

BREED

Scottish Terrier

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

A large expansile irregular shaped mass of approximately 15 cm length and 12 cm diameter is occupying and deviating the entire left division of the liver. Multifocal cavitation and heterogeneous contrast enhancement are noted within the mass. The central and right division of the liver are deviated to the right dorsal abdomen. The remainder of the liver parenchyma presents occasional hypoenhancing nodules. The gallbladder is deviated towards the right of the midline. No direct interference with the portal vein or common bile duct is seen.

SEX

FS

AGE

10

Both kidneys present small cortical renal cysts. Suture material from prior spay is seen caudal to both kidneys.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The adrenal glands present within normal limits.

Faintly hyperenhancing nodules of the spleen are seen.

Thorax

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

HOSPITAL NAME

Northeast Veterinary
Referral Hospital

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 are uniform and considered within normal limits.

REFERRING VET

Dr. Runde

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

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.

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The lung parenchyma presents the expected architecture and attenuation behavior.

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

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10-31-22



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COMPUTED TOMOGRAPHIC DIAGNOSIS

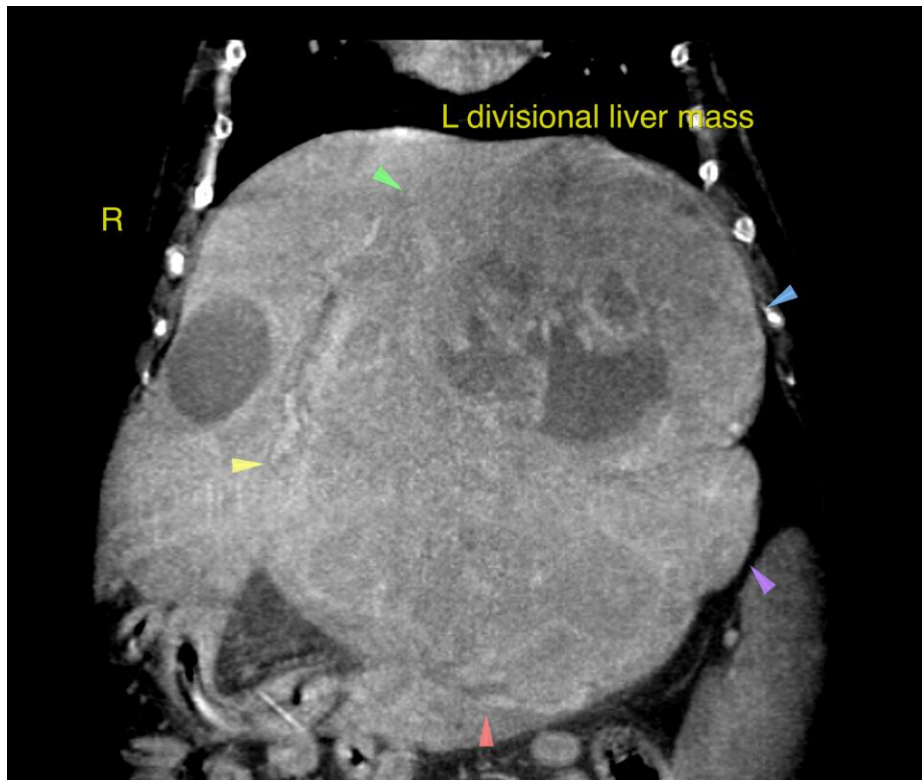
- Large left divisional liver mass occupying and expanding the entire cranial and mid abdomen.
- Hepatic and splenic nodules.
- Bilateral renal cysts - likely degenerative.
- No evidence of pulmonary metastatic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms presence of a large liver mass. The mass appears to originate and occupy the entire left division of the liver. No direct interference with critical structures in the portal hilus is seen. The mass appears to be in a resectable position. Differential diagnosis includes hepatocellular carcinoma and other primary or secondary neoplasia of the liver including hepatoma.

The hepatic and splenic nodules may represent regenerative nodules, benign nodular hyperplasia, extramedullary hematopoiesis, or metastatic disease.

No evidence of pulmonary metastatic disease is found.





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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.

SPECIES

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