



PATIENT

Meadow Gaines

PRESENTING CLINICAL SIGNS

Anemia, elevation of white blood cells, concern for neoplasia of lumbar spine.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN & LUMBAR SPINE

SPECIES

Canine

Plain and post contrast studies available for review.

BREED

Standard Poodle

COMPUTED TOMOGRAPHIC FINDINGS

A subpleural focal increase in attenuation with polygonal shape is seen in the lateral and dorsal aspect of the right caudal lung lobe.

SEX

Spayed Female

The patient is very thin.

Moderate to severe axial muscle atrophy is noted.

AGE

12 Years

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

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

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

Moderate generalized enlargement of the spleen is seen with occasional hyperenhancing nodules.

HOSPITAL NAME

Mobile Pet Imaging

The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

A 1.5mm sized mineral attenuating calculus is seen within the cystic duct of the gallbladder without evidence of obstruction.

REFERRING VET

Gordon

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

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

INVOICE

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Lumbar Spine

Permeative moth-eaten and punched out osteolytic defects are seen with multifocal distribution throughout the entire axial skeleton. All lumbar vertebrae are effected. The sacrum and pelvis bones present similar changes.

DATE

10-7-21

Mild amounts of amorphous periosteal new bone are seen on the ventral lumbar vertebral surfaces.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Polyostotic aggressive osteolysis of the axial skeleton.
- Severe axial muscle atrophy.
- Thin body condition.
- Interstitial pulmonary “nodule”
- Splenomegaly with hyperenhancing nodules.
- Small nonobstructive gallbladder calculus.
- No evidence of a gastric mass.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with polyostotic aggressive osteolysis in the lumbar spine, sacrum, and pelvis. Differential diagnosis includes multiple myeloma, lymphosarcoma, and less likely metastatic disease. Bone biopsies could be considered if a final diagnosis is strived.

The splenomegaly with nodules may be due to general anesthesia and benign nodular hyperplasia. However, a diffuse or nodular neoplastic infiltrate including plasmacytoma/multiple myeloma cannot be ruled out. Consider fine needle aspiration for further definition.

The subpleural interstitial “nodule” in the right caudal lung lobe is more likely to represent focal fibrosis/fibrotic nodule rather than metastatic disease based on its appearance. However, early metastatic disease cannot be ruled out entirely.



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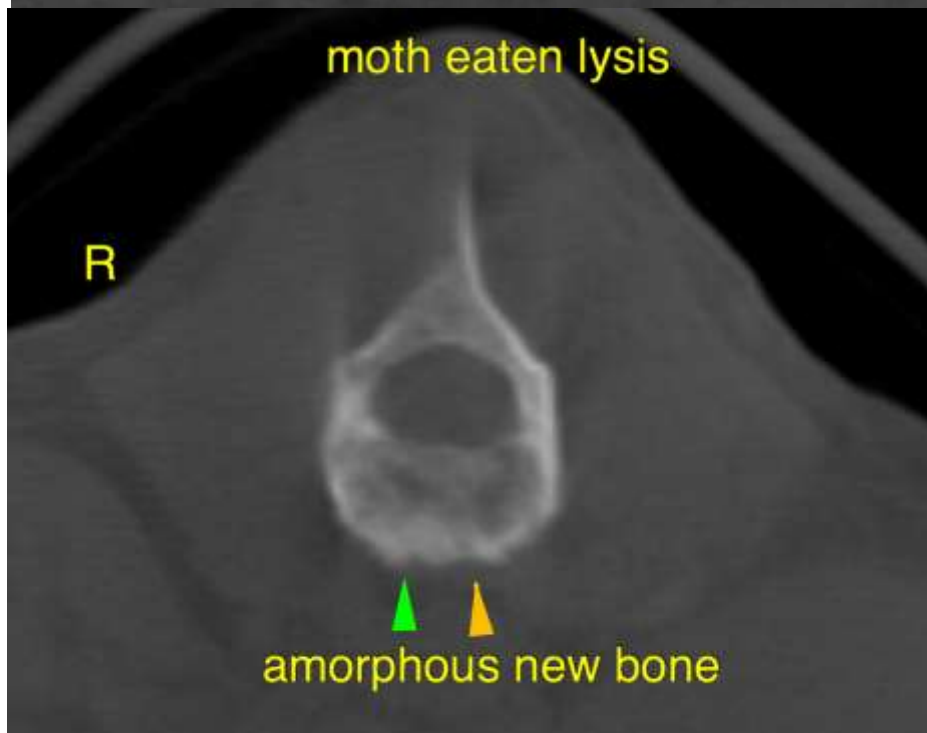
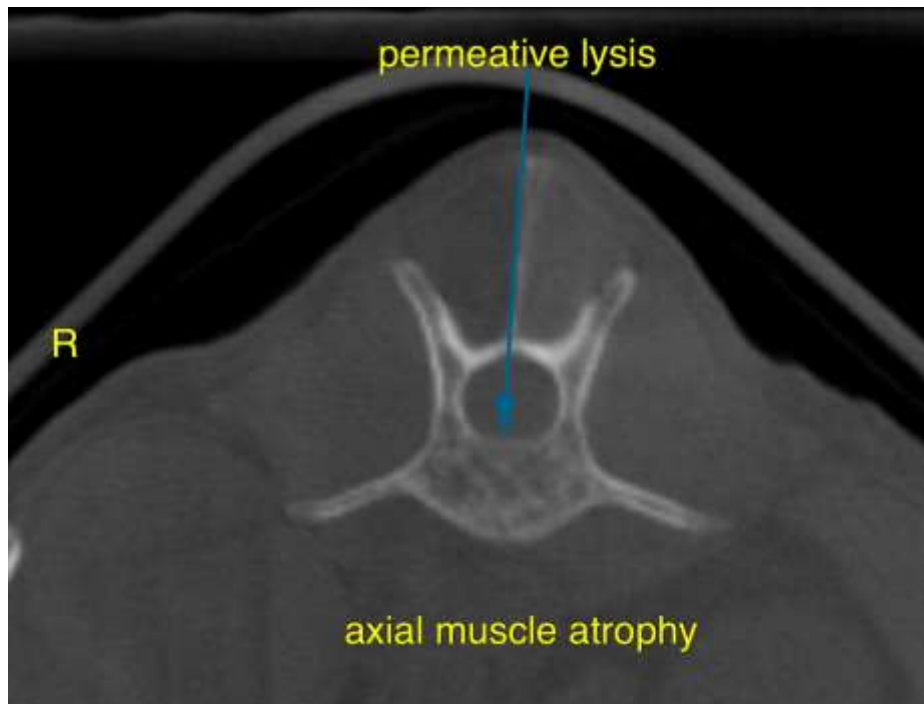
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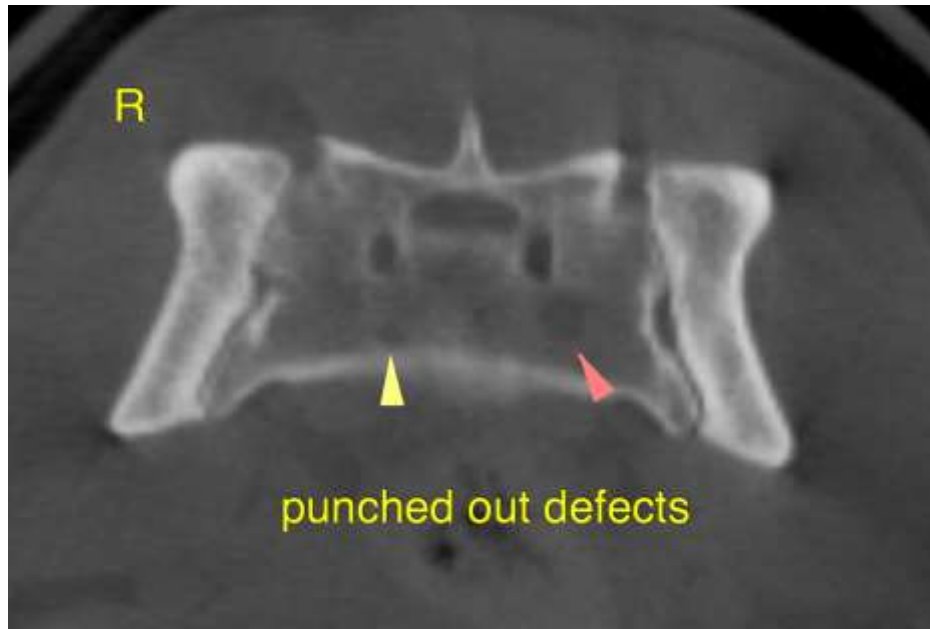
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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