



PATIENT

Button Amaro

SPECIES

Canine

BREED

Terrier Mix

SEX

MN

AGE

15

WEIGHT

4.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

DM/JS

HOSPITAL NAME

Green Dog Dental and
Wellness

REFERRING VET

Dr. Geist

INVOICE

72554

DATE

11-10-25

PRESENTING CLINICAL SIGNS

Chronic pancreatitis, Glaucoma, Heart Murmur, Sensitive Hips; has been tested for Cushings' in the past. Current medications: Ursodiol, dorzolamide, gabapentin, Proviabie
Abnormal PE/Chem/CBC/UA Results: Elevated liver enzymes (ALT most prominent). Increased SDMA/BUN.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The abdomen is pendulous.

Muscle wasting is noted.

There is a 7 x 8 x 5 cm sized expansile mass involving the left lateral liver lobe with nonuniform contrast enhancement. Multiple smaller nodules are present throughout the hepatic parenchyma consistent with multifocal hepatic lesions.

Multiple small hypoenhancing nodules are present within the splenic parenchyma.

Multiple cortical renal cysts are seen within both kidneys. No evidence of obstructive uropathy is noted.

The left adrenal gland is expanded by an approximately 2 x 2 x 1.5 cm sized heterogeneously enhancing mass at the caudal pole. The right adrenal gland presents within normal limits. Evidence of vascular invasion of the left adrenal mass is not seen.

There is no free abdominal fluid noted.

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large expansile left lateral liver mass with multiple additional hepatic nodules.
- Multiple splenic nodules.
- Left adrenal mass meeting neoplastic criteria without vascular invasion.
- Bilateral cortical renal cysts – incidental.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The large left lateral liver mass is well positioned for surgical resection though multifocal hepatic nodules may influence prognosis and surgical planning. Differential diagnosis for the hepatic mass includes primary neoplasia such as adenoma/hepatoma as well as hepatocellular carcinoma and secondary neoplasia of the liver. The nodules may represent benign nodular hyperplasia or regenerative nodules. Metastatic disease cannot be ruled out.

The splenic nodules are nonspecific but may represent benign myelolipomas, extramedullary



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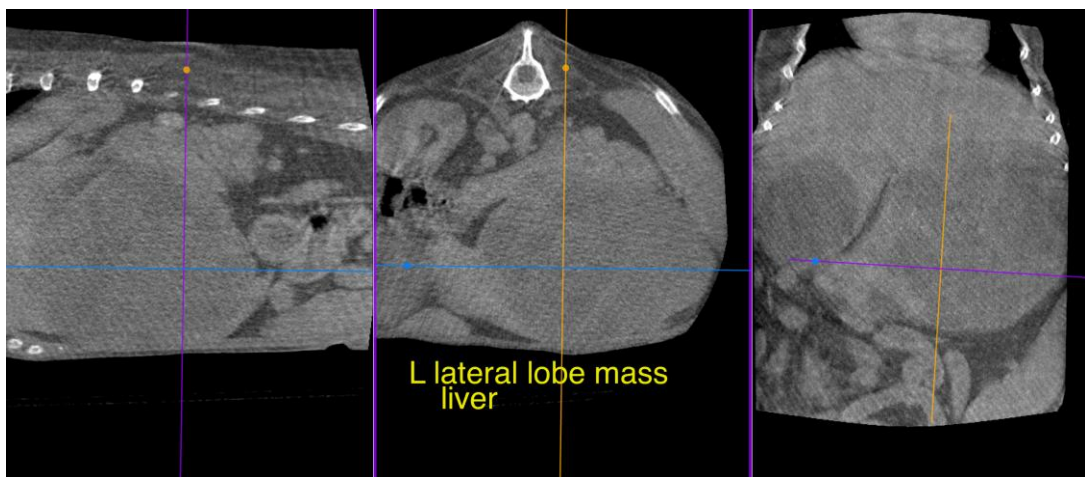
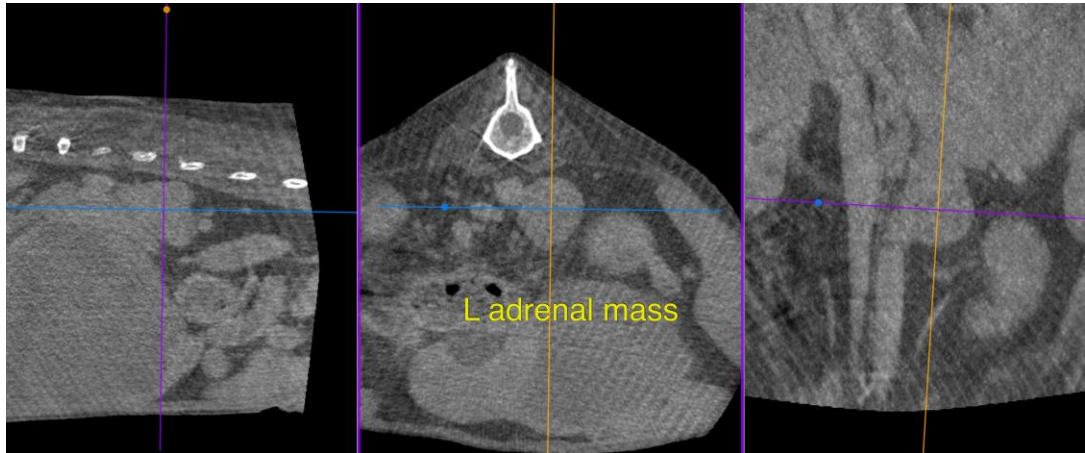
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hematopoiesis, or lymphoid hyperplasia even though concurrent neoplastic metastatic disease cannot be ruled out entirely.

The left adrenal mass is small with no evidence of local vascular invasion. Adenoma and adenocarcinoma are primary differential diagnoses. Other neoplasia such as pheochromocytoma, incidentaloma, metastasis cannot be ruled out but is considered less likely. Endocrine evaluation is recommended to determine functional status.



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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