



## PATIENT

Hetty Tassone

## SPECIES

Canine

## BREED

Lhasa Apso

## SEX

FS

## AGE

11Y

## WEIGHT

10kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Carmen Chan

## HOSPITAL NAME

Green Dog Dental and  
Wellness

## REFERRING VET

Dr. Geist

## INVOICE

72574

## DATE

11-11-25

## PRESENTING CLINICAL SIGNS

There is a hyperechoic marginated mass with a hypoechoic rim measuring 4.7 x 3.1cm in the mid left liver. The previously noted liver nodule remains the same size, 1.3cm, and is located between the mass and the gall bladder. The rest of the liver is mildly enlarged diffusely. H/o splenectomy

## COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

## COMPUTED TOMOGRAPHIC FINDINGS

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.

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

The patient has a history of splenectomy.

The liver is mildly diffusely enlarged. Previously identified mid left liver mass is not clearly differentiated from the surrounding parenchyma on CT. No discrete attenuation differences or focal perfusion defects were identified on the contrast enhanced study. A previously noted 1.3 cm sized liver nodule between the aforementioned mass and gallbladder is not clearly visible on CT likely due to similar attenuation to surrounding parenchyma or motion related streak artifacts.

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.

The patient's body condition score is mildly elevated.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Liver enlargement is confirmed.
- No definitive discrete hepatic masses or nodules are identified on CT.
- The previously described liver mass and nodule may not be appreciable due to similar attenuation to normal parenchyma or artifacts related to breathing motion.
- Absent spleen secondary to prior splenectomy.
- Elevated body condition score, otherwise normal CT presentation of the abdomen.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound correlation is recommended particularly for the liver as some hepatic lesions may not be distinguishable on CT due to isodense attenuation, similar perfusion to the surrounding tissue, or due to breathing motion related artifacts. Consider serial ultrasound imaging as well as ultrasound guided FNA or biopsy if the hepatic mass and nodule remain a clinical concern.



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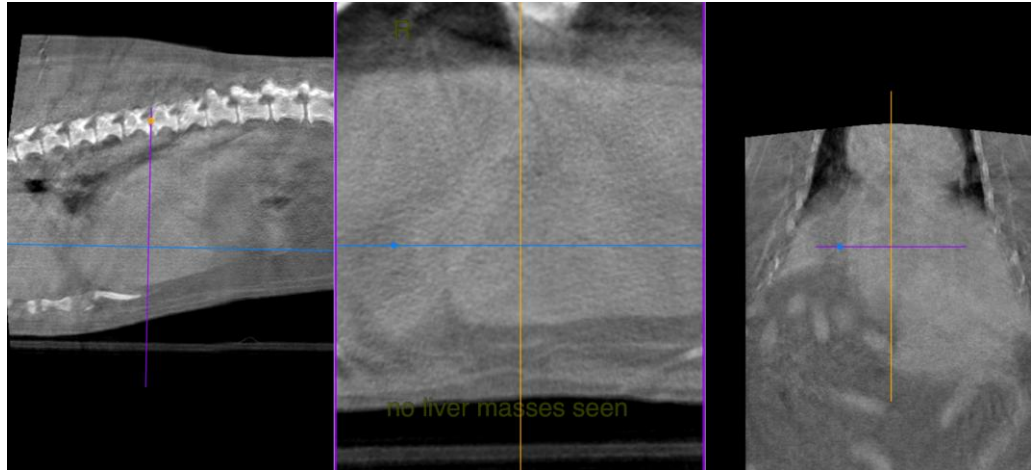
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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