



PATIENT

Natasha Randall

SPECIES

Canine

BREED

Jack Russel Terrier Mix

SEX

FS

AGE

10Y

WEIGHT

29.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

72726

DATE

11-24-25

PRESENTING CLINICAL SIGNS

P was diagnosed radiographically and with an ultrasound with a splenic mass. This study is with the purpose of assessing if there is in fact a splenic mass, if this is surgically resectable

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Post contrast study of the thorax and plain and post contrast studies of the abdomen are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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.

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

Moderate dorsoventral collapse of the trachea is noted.

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.

The lung parenchyma presents the expected architecture and attenuation behavior. No evidence of pulmonary nodules or masses is seen.

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

Abdomen

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.

A 3 cm sized, expansile, heterogeneously enhancing, splenic mass is present containing areas of cavitation and faint mineralization.

A 40 mm sized faintly hypoenhancing nodule is present in the left medial liver lobe. The remainder of the liver presents within normal limits.

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 elevated.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Single expansile cavitating splenic mass.



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- Single hepatic nodule left medial liver lobe.
- Elevated body condition score.
- Signs of dynamic tracheal disease.

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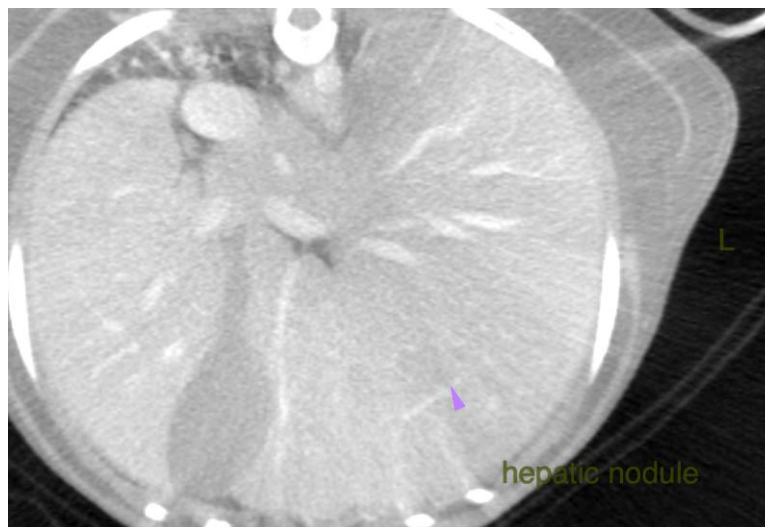
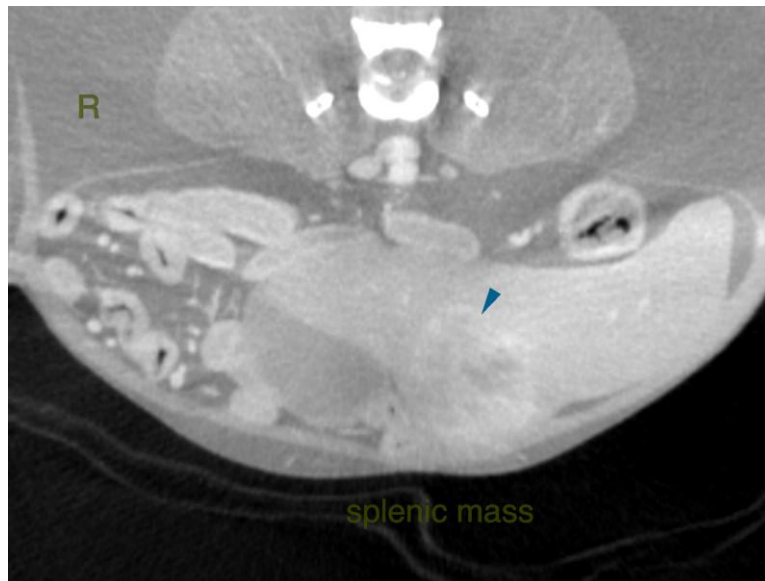
11-24-25

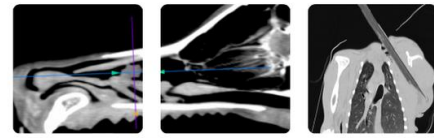
INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is meeting neoplastic criteria. Hemangioma, hemangiosarcoma, or other splenic tumor is considered likely. The mass is surgically resectable by means of splenectomy.

The hepatic nodule may represent metastasis, however, based on the CT presentation, benign nodular hyperplasia and regenerative nodule are considered more likely differential diagnoses.

Evidence of pulmonary metastatic disease is not seen.





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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.

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Jack Russel Terrier Mix

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

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Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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