



PATIENT

Cali Fernandez

SPECIES

Canine

BREED

Mixed Small Breed

SEX

SF

AGE

13Y

WEIGHT

15.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

José L. Alvarado Bruno -
CT Scan Technician (CVT)

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Dr. I. Vazquez, DVM, MS,
DACVIM (Oncology)

INVOICE

73093

DATE

12-22-25

PRESENTING CLINICAL SIGNS

Cali has been diagnosed with a right adrenal gland mass that is highly suspicious for an adrenocortical carcinoma (ACC), particularly given the presence of mineralization, which is commonly associated with malignant adrenal tumors. A CT scan can be considered in the near future if interested in removing her adrenal gland mass as this can potentially be curative.

Abnormal PE/Chem/CBC/UA Results: CBC --- WBC severe increased (32.51), NEU increased (26.40), MONO increased (2.81), PLT increased (524) CHEM --- GLU increased (185), CREA decreased (0.2), ALT increased (245), ALP severe increased (>2,000), GGT increased (36) Blood Pressure --- 130mmHg UPC Ratio --- 1.6

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A heterogeneous mass with multiple mineralizations and cavitations of the right adrenal gland is seen. The mass presents heterogeneous contrast enhancement and measures 35 x 30mm. No evidence of vascular invasion is noted.

A 20 x 25mm sized left adrenal gland mass accentuating the caudal pole with heterogeneous enhancement and one focal mineralization is noted. There is no evidence of vascular invasion.

Multiple enhancing splenic nodules as well as one non-enhancing nodule compatible with a benign myelolipoma are seen.

Mild generalized hepatomegaly is noted. No focal hepatic lesions are identified. The liver margins are slightly rounded.

Mild common bile duct dilation without evidence of mechanical obstruction is seen.

Multiple bilateral cortical renal infarcts, small cortical renal cysts, and small nonobstructive calculi are noted in both kidneys.

No significant lymphadenopathy is identified in the abdomen.

There is no free abdominal fluid.

Generalized muscle wasting is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral adrenal gland masses with mineralizations and without vascular invasion.
- Multiple splenic nodules including one benign myelolipoma.
- Degenerative changes and nonobstructive calculi of both kidneys.
- Mild generalized hepatomegaly.
- Generalized muscle wasting.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals bilateral adrenal gland masses meeting neoplastic criteria. Mineralization is commonly seen in adrenocortical tumors and may be present in both adenomas or adenocarcinomas. Imaging alone cannot definitively determine malignancy. Evidence of vascular invasion, however, is not



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seen at this point. Adrenocortical tumors may be functional or nonfunctional. The absence of vascular invasion is favorable if surgical removal is considered.

The multiple splenic nodules are likely to represent benign lymphoid hyperplasia, extramedullary hematopoiesis, and myelolipoma. Splenic neoplasia such as primary or secondary including metastatic is considered unlikely but cannot be completely excluded.



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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