



PATIENT

Peaches Bracy

SPECIES

Canine

BREED

Golden Retriever/Poodle Mix

SEX

Female Spayed

AGE

6 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Family Pet Veterinary Center

REFERRING VET

Emily Linscheid

INVOICE

56798

DATE

2-15-23

PRESENTING CLINICAL SIGNS

Chronic diarrhea and vomiting since December. Abdomen slightly tense on exam but not overtly painful. Unable to palpate much due to body condition. Normal cortisol, CPL and chemistry. Tried hydrolyzed diet with no improvement. No history of foreign body but cannot rule out. Has been treated for atopy with cytopoint and prior skin/ear infections with no apparent symptoms at this time. Currently on Proheart. Vomiting was controlled with Cerenia and last vomiting episode was yesterday morning but was able to keep food down this morning. Stool was soft but formed. Activity level is normal and is currently on Royal Canin GI low fat canned.
Abnormal PE/Chem/CBC/UA Results: Moderate neutrophilia historically but normal on bloodwork performed last week. Mild ALP elevation (150).

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right/left lateral and ventrodorsal views totaling 3 images available for review in jpeg format.

RADIOGRAPHIC FINDINGS

The abdominal serosal detail is slightly reduced circumferential to an ovoid 5.5 cm sized soft tissue mass in the cranioventral abdomen. The mass is in contact with the ventral abdominal wall and directly adjacent to the liver and stomach. Dorsal deviation of the splenic, large, and small intestine is seen.

The stomach, small, and large intestine present a mild amount of gas content. No evidence of segmental small intestinal dilation or radiopaque foreign material is seen.

RADIOGRAPHIC DIAGNOSIS

- Large soft tissue mass in the cranioventral abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a large soft tissue mass in the cranioventral abdomen. Splenic origin is considered by far most likely. Neoplasia such as hemangiosarcoma, or hemangioma, and hematoma are primary differential diagnoses. Pedunculated mass of the liver and mesenteric mass are potential but by far less likely differential diagnoses.

Full abdominal ultrasound could be considered to further verify the origin of the mass and rule out abdominal metastatic disease as well as hemorrhage or other effusion. Three view thoracic radiographs could be considered for a complete staging as well.



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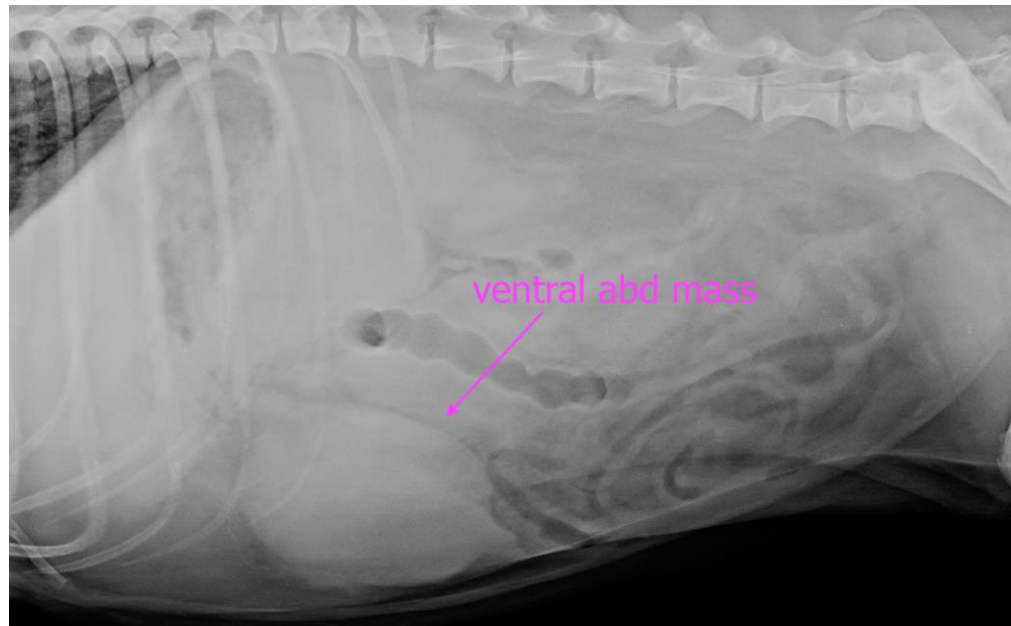
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, DVM, Dr. med. vet., DipECVDI
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