



PATIENT

Bella Mia Bianchi

SPECIES

Canine

BREED

Mini Schnauzer

SEX

FS

AGE

13 Years, 11 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Hawkins

INVOICE

56613

DATE

2-6-23

PRESENTING CLINICAL SIGNS

Pet had a hepatic adenocarcinoma removed in 2022 with incomplete margins. This has been monitored both here and at Animal Cancer and Imaging Specialists (ACIS) and has steadily been re-growing. Patient has had Cushing's disease since 2019 and is on Trilostane 25 mg BID. No current clinical disease associated with growing tumor, which was last noted on abdominal US at ACIS on 1/30/23 as 7.05 cm x 5.49 cm.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A large multicavitated pedunculated mass of approximately 9 x 7 cm is emerging from the papillary process of the caudate lobe of the liver. Dorsal deviation of the pancreas, stomach, and transverse colon is seen. There is no evidence of peritoneal effusion and no evidence of interference with the gallbladder, common bile duct, cystic duct, gastric outlet, or portal vein. The remainder of the hepatic parenchyma presents enlargement, rounded lobar margins, and multiple faintly hypoenhancing nodules.

The cystic duct is mildly dilated.

Bilaterally symmetric adrenomegaly with the right and left adrenal glands measuring approximately 25 x 10mm (caudal pole diameters) is seen.

Occasional hyperenhancing splenic nodules are noted.

The kidneys presents within age related normal limits.

No gastrointestinal tract abnormality is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large pedunculated central divisional liver mass meeting neoplastic criteria.
- Generalized hepatomegaly with small nodules.
- Bilaterally symmetric adrenomegaly.
- Small splenic nodules.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A large pedunculated central divisional liver mass most likely arising from the caudate lobe of the liver is seen. Hepatocellular carcinoma is a primary differential diagnosis. Hepatoma, liver sarcoma, and round cell neoplasia are considered less likely but cannot ruled out entirely. The remainder of the findings of the liver are suggestive for endocrine hepatopathy. Metastatic disease cannot be ruled out entirely but is thought less likely.

The bilateral adrenomegaly suggests potential for bilaterally symmetric functional hyperplasia secondary to pituitary dependent hyperadrenocorticism/pituitary adenoma.

The splenic nodules are more likely to represent extramedullary hematopoiesis or benign nodular



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hyperplasia rather than metastatic disease even though this cannot be ruled out entirely. Fine needle aspiration could be considered for further definition.

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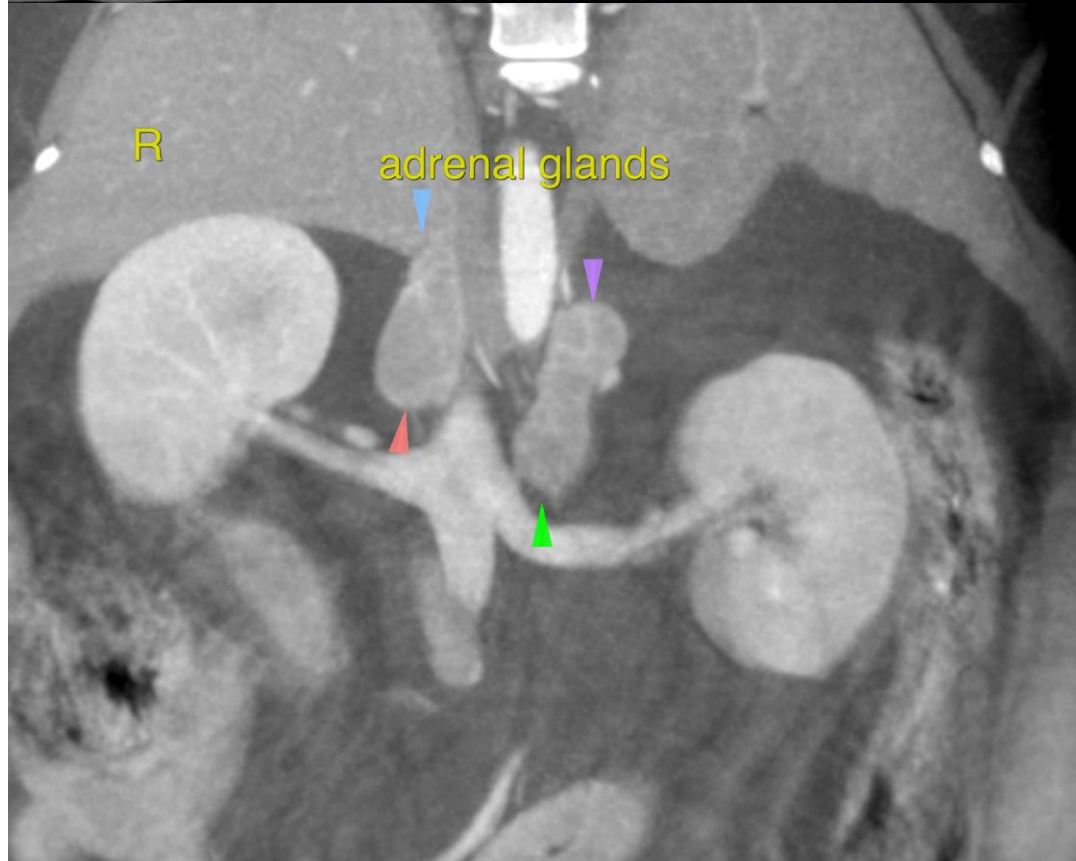
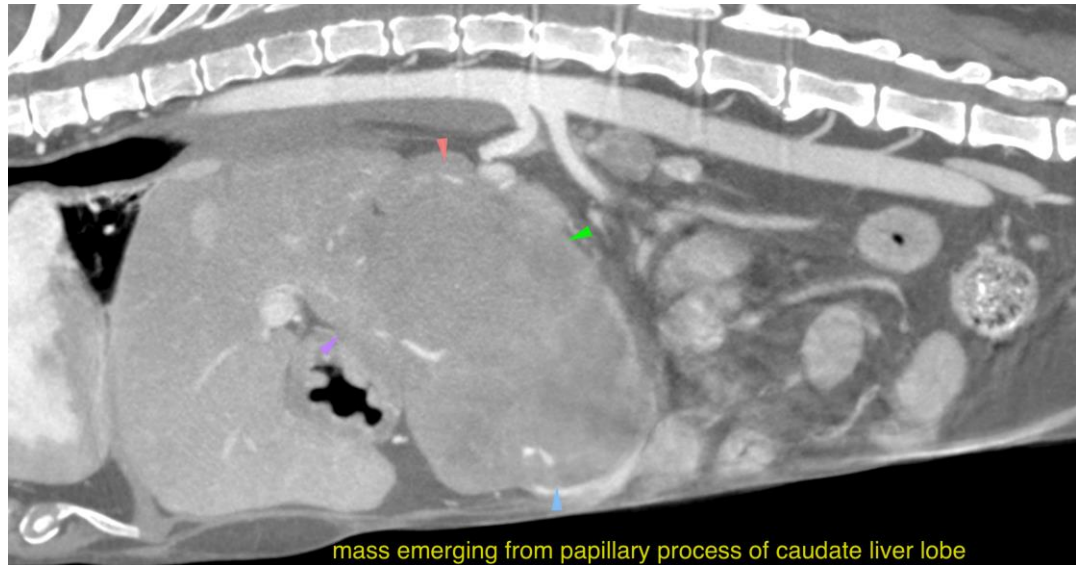
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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