



PATIENT

Cricket Doty

PRESENTING CLINICAL SIGNS

History of chronically elevated TBILI and ALB - referring vet suspects gall bladder obstruction. Performing CT to evaluate surrounding organs/structures.
Abnormal PE/Chem/CBC/UA Results: Elevated ALB, TBILI.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

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

BREED

American Eskimo Dog

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

Mild generalized hepatomegaly is noted with pointed lobar margins. There is no evidence of intra- or extra-hepatic biliary duct dilation. A 2.5mm sized cyst is seen in the caudate lobe of the liver. The gallbladder is moderately distended. A mild amount of mineral attenuating material is seen within the gallbladder. The cystic and common bile duct are nondilated. The common bile duct can be dilated from the portal hilus to the major duodenal papilla and presents no evidence of dilation, obstruction, or other structural abnormality.

SEX

MN

AGE

6 Years, 5 Months

The descending duodenum presents within normal limits.

The pancreas presents within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

No evidence of regional lymphadenomegaly is noted.

Occasional hyperenhancing splenic nodules are seen.

Occasional small mineral attenuating foci and a 10mm sized cyst are seen within the left kidney.

HOSPITAL NAME

Catskill Veterinary
Services, PLLC

The adrenal glands present within normal limits.

The mesenteric lymph nodes present within normal limits.

Thorax

REFERRING VET

Tri-State Veterinary

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio.

INVOICE

57878

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

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.

DATE

4-18-23

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of



PATIENT abnormal dilation.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

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- Biliary microlithiasis
- Mild hepatomegaly
- No evidence of extra- and intra-hepatic biliary duct dilation.
- No evidence of obstruction of the biliary system.
- Splenic nodules.
- Renal mineralization and small renal cyst.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no evidence of obstructive pathology of the biliary system. The cystic and common bile duct present within normal limits. Biliary microlithiasis is noted. Concurrent cholecystitis or emerging gallbladder mucocele cannot be ruled out entirely however the macromorphological CT changes do not necessarily support this.

The mild generalized hepatomegaly may be due to vacuolar, metabolic, endocrine hepatopathy. Hepatitis, such as cholangiohepatitis, storage diseases, and infiltrative disease are potential differential diagnoses. Further definition by means of parenchymal sampling for histology could be considered.

The splenic nodules are likely to represent lymphoid hyperplasia or extramedullary hematopoiesis. Splenic neoplasia cannot be ruled out entirely but is thought by far less likely. Ultrasound guided FNA or ultrasonographic monitoring could be considered.

The renal cyst and mineralization may represent degenerative changes. Nephrocalcinosis and chronic nephritis are other potential but less likely differential diagnoses.



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REFERRING VET

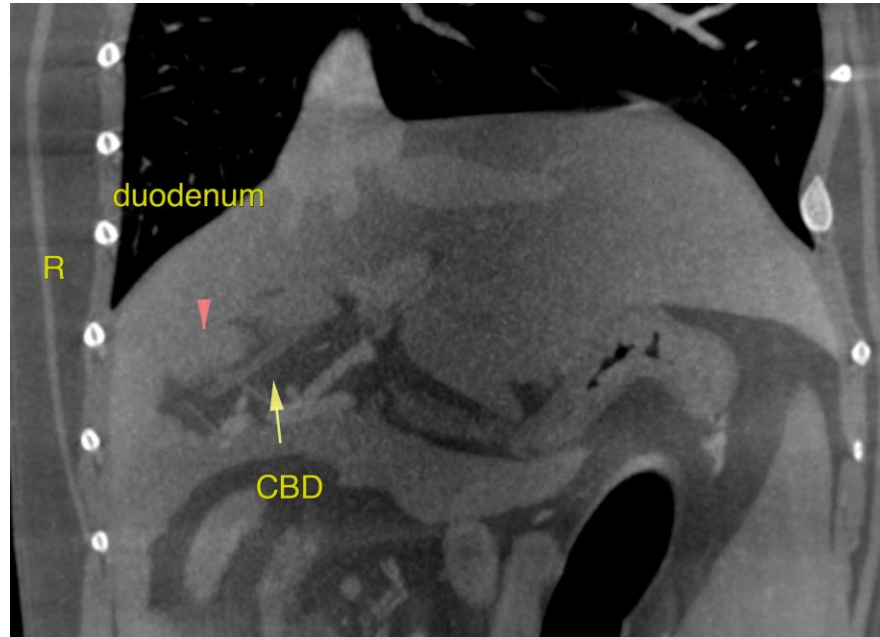
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com