



**PATIENT PRESENTING CLINICAL SIGNS**

Beau Hayman Mild increase in ALP lead to Abd. US--> splenic mass noted; chest rads sent for met check, no obvious metastasis, but possible mediastinal mass or sliding hiatal hernia.  
Abnormal PE/Chem/CBC/UA Results: Abd. ultrasound and radiograph reports are attached for reference.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN & THORAX**

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

**BREED**

Yorkie Mix

**COMPUTED TOMOGRAPHIC FINDINGS**

**Thorax**

**SEX**

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

Neutered Male

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. No evidence of a caudal mediastinal mass noted.

**AGE**

9 Years, 4 Months

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

Mild dorsoventral tracheal collapse of the cervical trachea is seen.

**INTERPRETED BY**

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

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.

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

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No evidence of a hiatal hernia.

**Abdomen**

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The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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.

**INVOICE**

57622

The adrenal glands are within normal limits for size, shape and organ architecture.

**DATE**

4-4-23

Moderate generalized enlargement of the liver is seen. There is a heterogeneously enhancing 2 cm sized nodule in the ventral aspect of the left medial liver lobe. The remainder of the liver presents diffuse heterogeneous enhancement. Rounding of the left lateral and right medial liver lobes and the papillary process is noted.

**PATIENT**

Beau Hayman

An isoattenuating 1.5 cm sized nodule is seen in the splenic head. An expansile 1.5 cm sized heterogeneously enhancing nodule is seen in the splenic tail.

**SPECIES**

Canine

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**BREED**

Yorkie Mix

The bony and surrounding soft tissue structures reveal no abnormalities.

**SEX**

Neutered Male

- COMPUTED TOMOGRAPHIC DIAGNOSIS**
- Expansile heterogeneously enhancing splenic nodule in the splenic tail and isoattenuating splenic nodule in the splenic head.
  - Heterogeneously enhancing hepatic nodule in the left medial liver lobe.
  - Moderate hepatomegaly with diffuse heterogeneous enhancement.
  - No evidence of pulmonary metastases.
  - No evidence of hiatal hernia or caudal mediastinal mass.
  - Evidence of dynamic tracheal disease.

**AGE**

9 Years, 4 Months

**INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS**

The CT study reveals hepatomegaly and a heterogeneously enhancing 2 cm sized nodule in the left medial liver lobe. Differential diagnosis includes metabolic, endocrine, or vacuolar hepatopathy. Hepatitis and diffuse neoplastic infiltrate cannot be ruled out.

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

Differential diagnosis for the left medial lobe nodule includes nodular hyperplasia, regenerative nodule, primary and secondary hepatic neoplasia. Sampling of the general hepatic parenchyma and nodule could be considered for further definition.

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The splenic nodules may represent splenic neoplasia such as hemangioma, hemangiosarcoma, or lymphoid hyperplasia, and extramedullary hematopoiesis. Splenectomy could be discussed versus sampling of the spleen.

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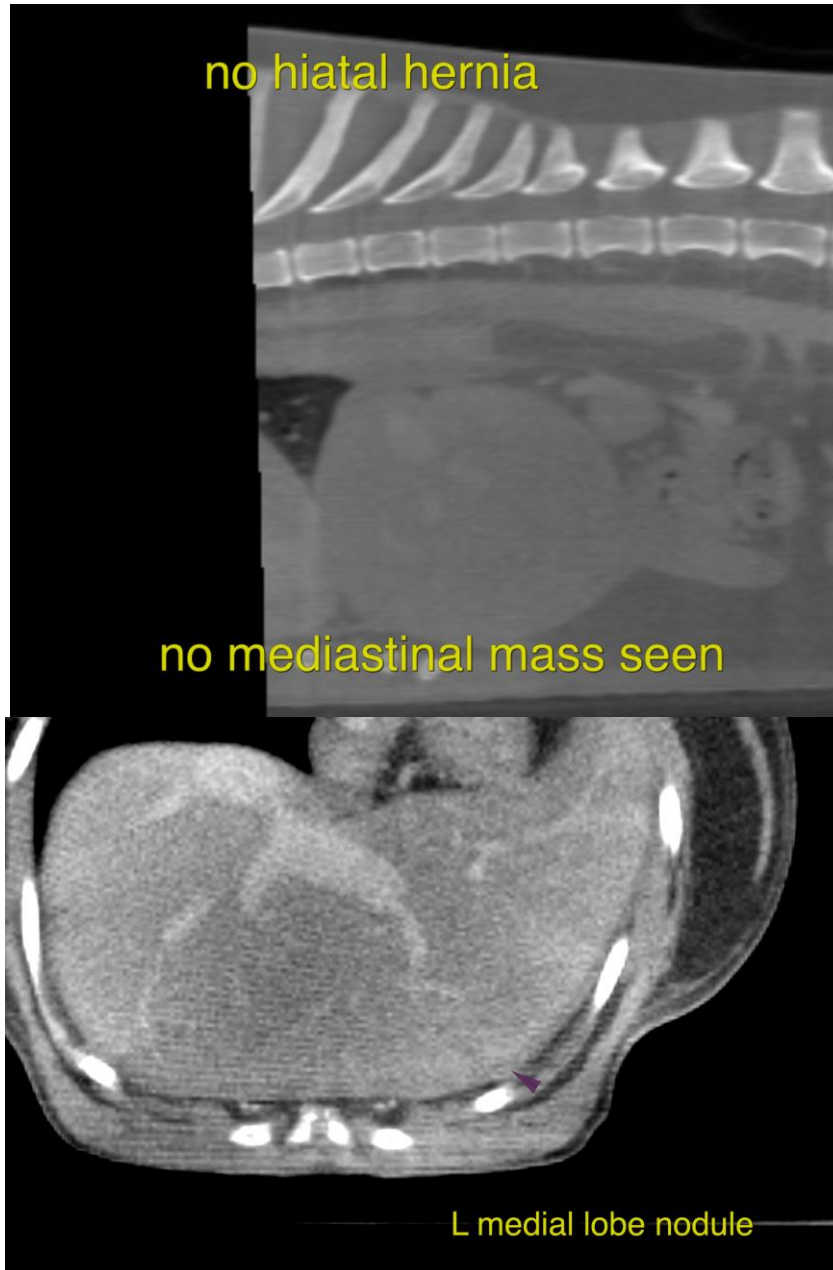
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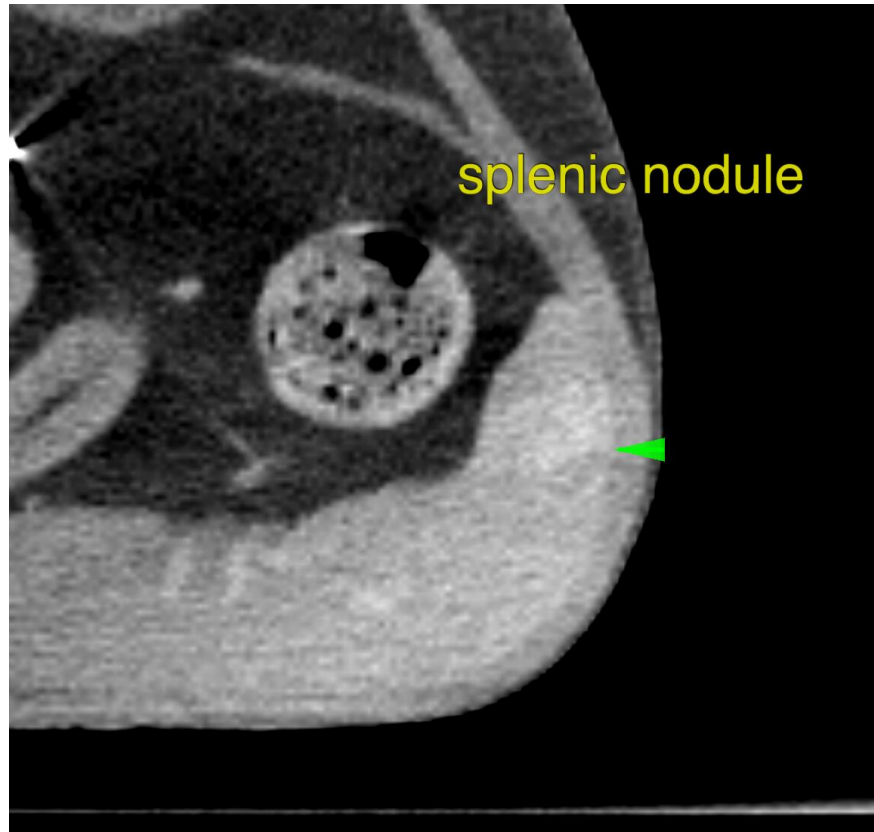
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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