



PATIENT

Elmo Goh Sue Seng

SPECIES

Canine

BREED

Standard Schnauzer

SEX

Male Entire

AGE

13 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Medical
Centre Sdn Bhd

REFERRING VET

Dr. Sivan

INVOICE

52120

DATE

5-12-22

PRESENTING CLINICAL SIGNS

Patient was coming for second opinion regarding vomiting and coughing. Surgery (lipoma removal) done around 14/3/22 at another Vet, chem 10 sdma done also before surgery and only sdma elevated. After surgery patient had coughing almost every night, vomit usually after coughing. Around 23 April went to other vet and vet said something to do with the trachea, prescribed with pred 5mg 1/4 tab BID, theophylline 125 mg 1/4 tab BID, clavamox 375 mg 1/4 tab BID. Also no improvement with the medication. Radiograph of neck and thorax were taken; There is mass effect present in the dorso-caudal aspect of the thoracic cavity, centered in midline. There is ventral depression of the trachea seen on lateral view. Cardiac silhouette within normal limits. Differential Diagnosis: esophageal mass? Megaesophagus? Esophagram was performed; There is a focal dilation and filling defect in caudal esophageal region;

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Plain and post contrast studies in soft tissue and lung windows available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Generalized muscle wasting is noted.

Thorax

Severe generalized dilation of the esophagus is seen. The esophageal lumen is dilated in general with no evidence of stenosis, foreign material, or mass lesions. Fluid accumulation is seen ventrally within the esophagus with a meniscus sign. Ventral deviation of the trachea and carina is seen secondary to the mass effect of the dilated esophagus.

There is no evidence of mediastinal lymphadenomegaly or other mediastinal mass effect.

A moderate multifocal mixed alveolar interstitial lung pattern is noted within the left lung.

Abdomen

A 15mm sized hypoenhancing nodule is seen within the central division of the liver. The gallbladder is moderately distended. A moderate amount of mineral attenuating material is seen ventrally within the gallbladder. No evidence of intra- or extra- hepatic biliary duct dilation and no evidence of common bile duct dilation is noted.

An 8mm sized enhancing focal thickening of the luminal gastric wall is seen in the lesser curvature of the stomach in the pyloric antrum.

Mild generalized splenic enlargement with multiple iso- and hyper-enhancing nodules is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Megaesophagus with gastroesophageal reflux and aspiration pneumonia.
- Suspect polypoid mass in the pyloric antrum.
- Biliary microlithiasis.
- Central divisional hepatic nodule.



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- Multiple splenic nodules.

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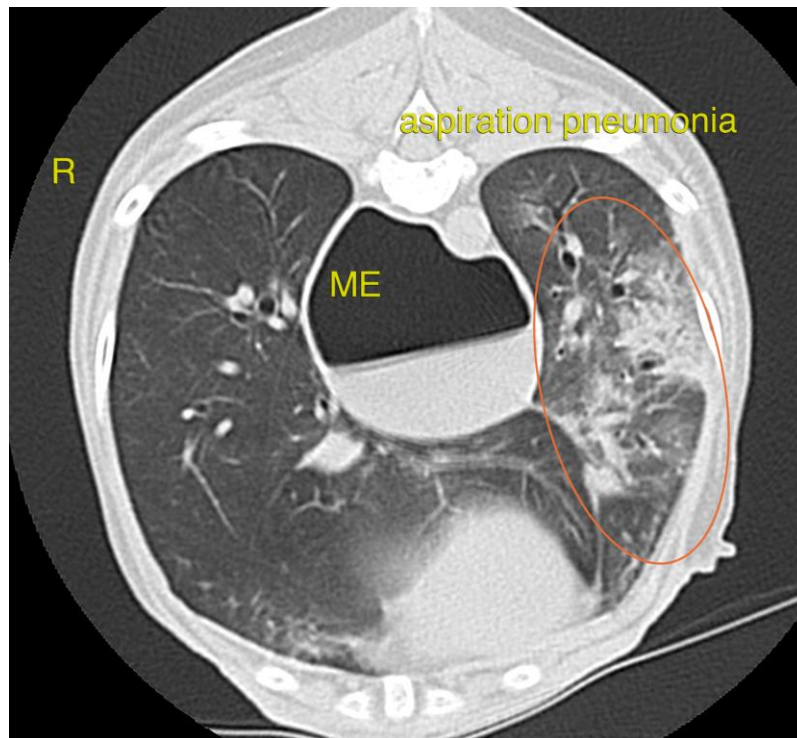
5-12-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals megaesophagus with gastroesophageal reflux and aspiration pneumonia. Potential underlying causes include idiopathic, neuromuscular, endocrine such as hypoadrenocorticism or hypothyroidism, esophagitis, and toxicity.

Presence of a small polypoid mass within the gastric pylorus is noted. Chronic inflammatory polyp is a primary differential diagnosis; however, early malignant transformation cannot be ruled out entirely and further definition by means of endoscopy with sampling could be considered.

The splenic and hepatic nodules are likely to represent benign nodular hyperplasia/ extramedullary hematopoiesis/ regenerative nodules. However, primary or secondary neoplasia of the liver and/or spleen cannot be ruled out entirely and further definition by means of fine needle aspiration could be considered even though the diagnostic accuracy of hepatosplenic cytology is low.





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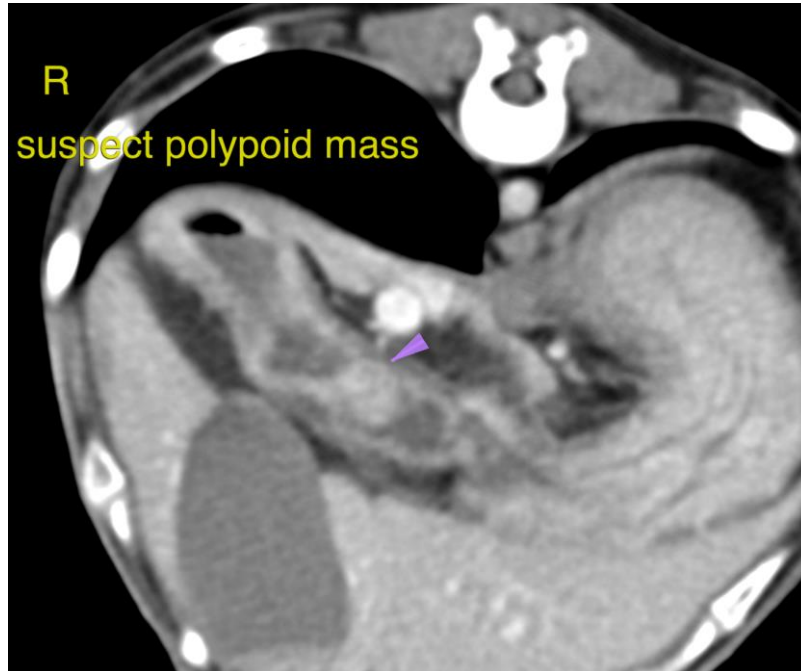
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
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