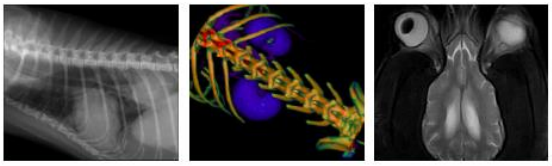

PATIENT

Beanz Luzadder

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

15

INTERPRETED BY

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

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Meaux

INVOICE

58089

DATE

5-2-23

PRESENTING CLINICAL SIGNS

Diagnosis/Assessment: 1) Hypoechoic hepatic nodule in right cranio-dorsal abdomen – suspect primary hepatic nodule; 2) Circumferential irregular wall thickening of colonic wall in segment of descending colon with loss of wall layering 3) Mild nephropathy, right cranial renal infarct 4) Mild caudal mesenteric lymphadenopathy.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A 5mm long segment of the caudal pre-pelvic descending colon shows irregular circumferential wall thickening with loss of wall layering. Maximum wall thickness is 7.5mm. Heterogeneous enhancement is seen within the wall of the colon.

The colon lymph nodes present cystic multinodular enlargement and measure approximately 17 x 15mm.

The remainder of the mesenteric lymph nodes present within normal limits.

Moderate generalized hepatomegaly with multiple cystic nodules of up to 18mm diameter is seen. The nodules are distributed throughout all divisions of the liver and present fluid attenuating contrast negative content. The gallbladder is moderately distended with uniformly fluid attenuating bile.

Moderate extrahepatic biliary duct dilation is noted.

The common bile duct and pancreatic ducts are dilated at 4.8mm. No evidence of obstruction of the common bile or pancreatic ducts is seen.

The spleen and adrenal glands present within normal limits.

The right kidney is slightly smaller than the left kidney and small wedge shaped infarcts are seen in the cranial and caudal pole of the right kidney. The corticomedullary definition of both kidneys is slightly obscured.

L6/7 and L7/S1 spondylosis deformans is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Segmental circumferential transmural wall thickening with loss of layering of the caudal descending colon with associated lymphadenomegaly of the colon lymph nodes.
- Multicystic hepatopathy with hepatomegaly.
- Extrahepatic biliary duct dilation.
- Pancreatic and common bile duct dilation.
- Suspect chronic nephropathy with right renal infarcts.

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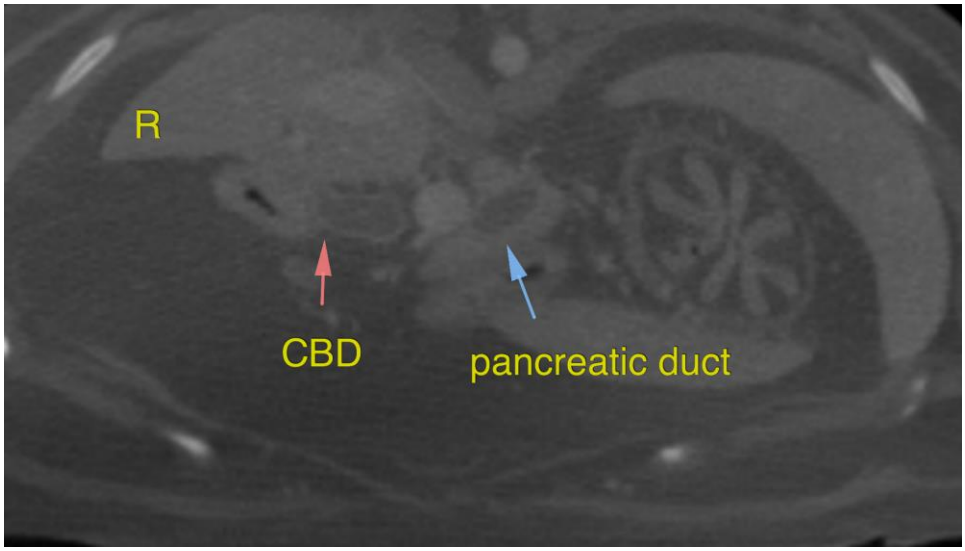
INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals segmental circumferential transmural loss of wall layering within the descending colon. The findings are highly suggestive for a neoplastic infiltrate such as with round cells. Severe colitis is potential differential diagnosis. The findings are not typical for gastrointestinal stromal tumor (GIST)/leiomyosarcoma, leiomyoma, adenocarcinoma, or adenoma. Further definition by means of colonoscopy with sampling has been performed already.

The mesenteric lymphadenomegaly may represent a metastatic / lymphomatous infiltrate. Reactive lymphadenitis is a potential differential diagnosis. Consider ultrasound guided fine needle aspiration to further define.

Multiple biliary cyst adenoma is a primary differential diagnosis for the multicystic nodules within the liver. Polycystic disease and cystic adenocarcinoma as well as metastases are considered less likely but cannot be ruled out entirely. Consider ultrasound guided FNA for further definition.

The dilation of the extrahepatic and pancreatic duct system suggests potential for triaditis.



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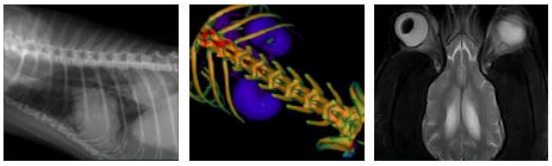

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1-800-838-4268 info@sonopath.com

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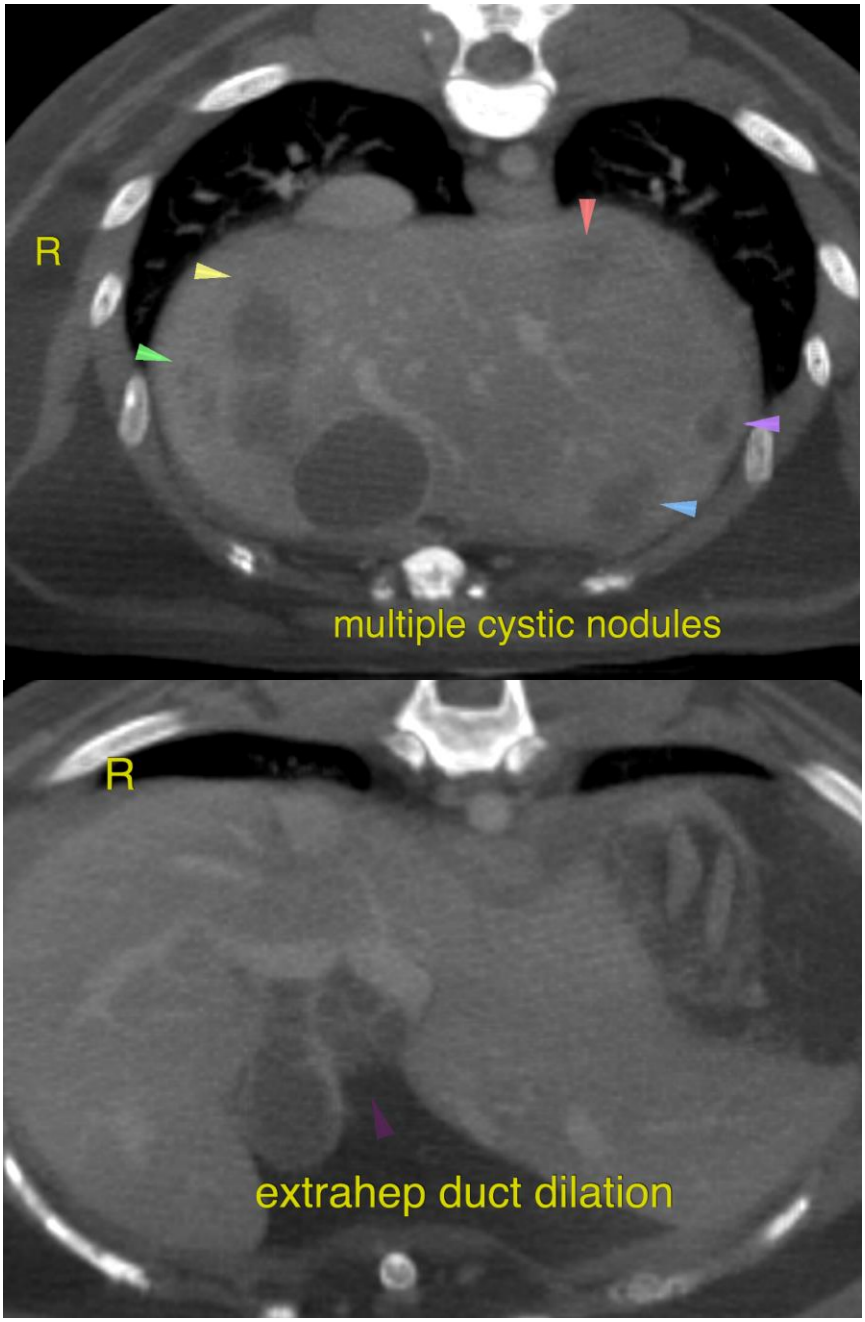

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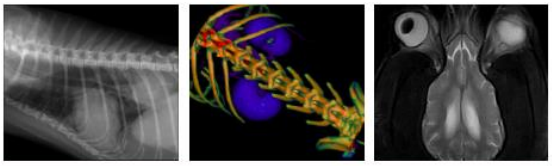

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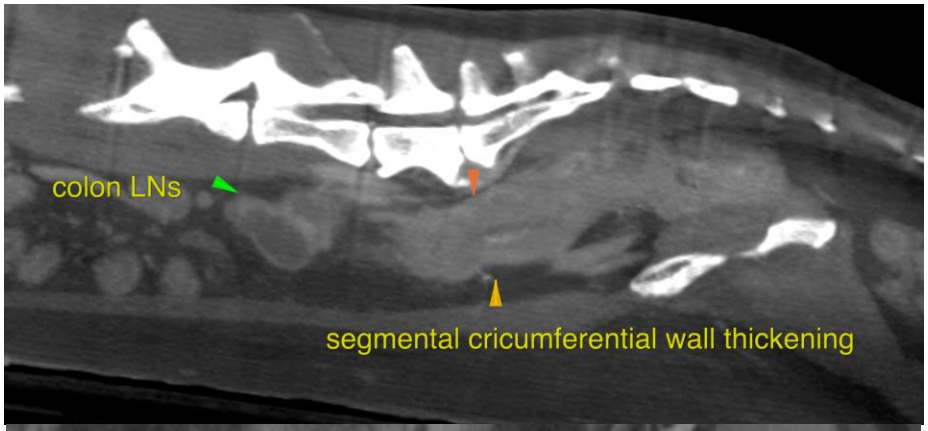

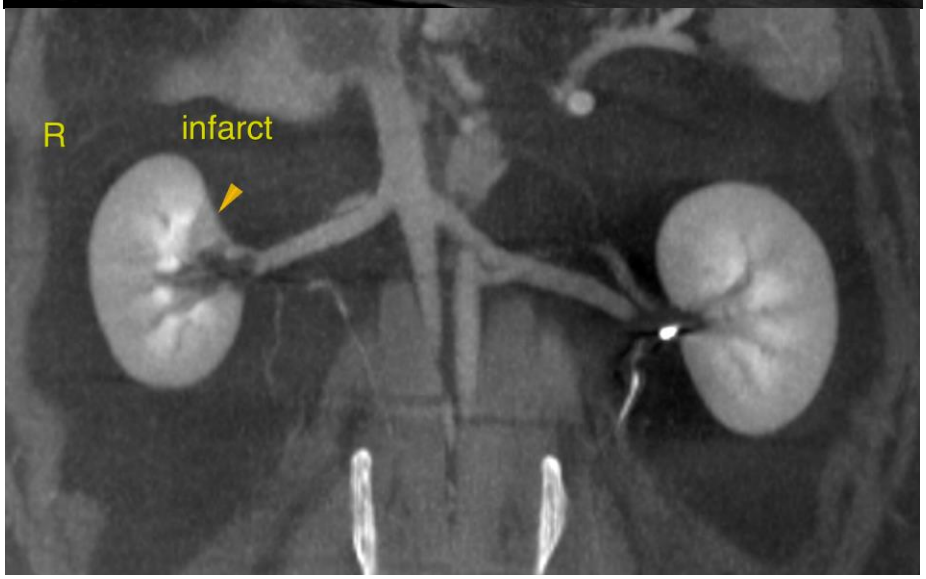

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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