



PATIENT

Chuchi Rodriguez

SPECIES

Canine

BREED

Terrier, Yorkshire Mix

SEX

MN

AGE

14Y

WEIGHT

10.4lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

74935

DATE

5-8-26

PRESENTING CLINICAL SIGNS

Abdominal radiographs were taken. Initial review revealed a mass effect causing ventral displacement of the colon.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The left kidney is smaller than the right measuring approximately 2.8 vs 3.8 cm in length. The left kidney demonstrates a weaker nephrogram consistent with reduced perfusion or chronic functional impairment. Mild pyelectasia is present on the left side. Small cortical cysts and multifocal infarcts are noted in both kidneys. A large, encapsulated fluid accumulation is present in the left retroperitoneal space caudal to the left kidney causing mild medial displacement of the left ureter. The ureter remains otherwise normal in caliber and course. The right kidney is relatively preserved aside from mild chronic changes.

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

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

Mild biliary microlithiasis is present without evidence of gallbladder obstruction.

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

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large encapsulated left retroperitoneal fluid collection caudal to the left kidney.
- Left renal asymmetry with reduced size and decreased nephrogram: suggestive of chronic renal disease.
- Bilateral renal cortical cysts and small infarcts: consistent with chronic degenerative or vascular renal disease.
- Mild biliary microlithiasis: likely incidental.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a large encapsulated left retroperitoneal fluid collection associated with and caudal to the left kidney. The CT findings are most consistent with a perinephric pseudocyst/chronic urinoma. Chronic seroma, organizing hematoma, and abscess are considered less likely but cannot be fully excluded. The findings do not suggest neoplasia. The perinephric pseudocyst is most likely a consequence of chronic renal disease. Alternative considerations include chronic urinoma which can occur with urinary leakage, organizing hematoma, or less likely abscess formation. Ultrasound guided aspiration of the left retroperitoneal fluid could be considered to further characterize the fluid collection for cytology biomechanical comparison (creatinine/urea) and culture not least, in order to



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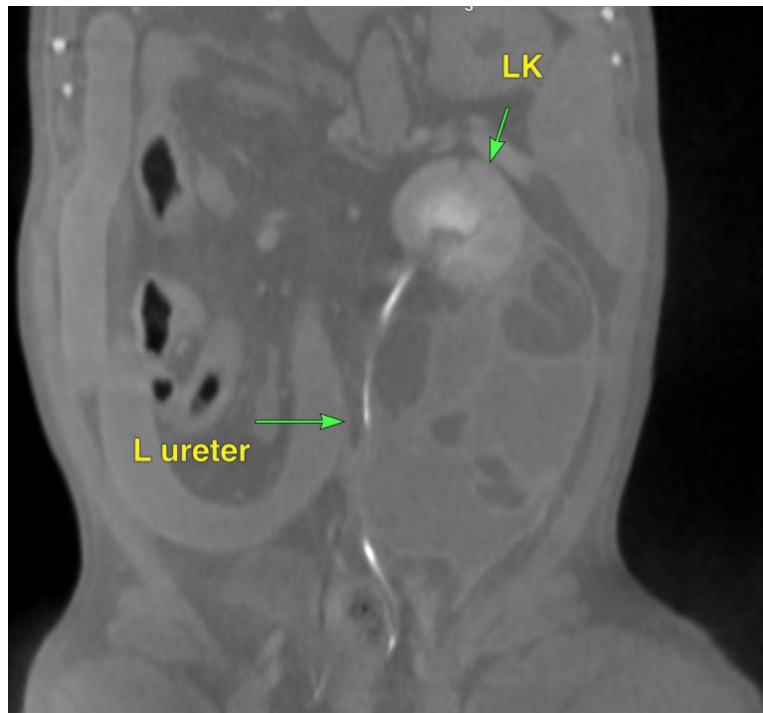
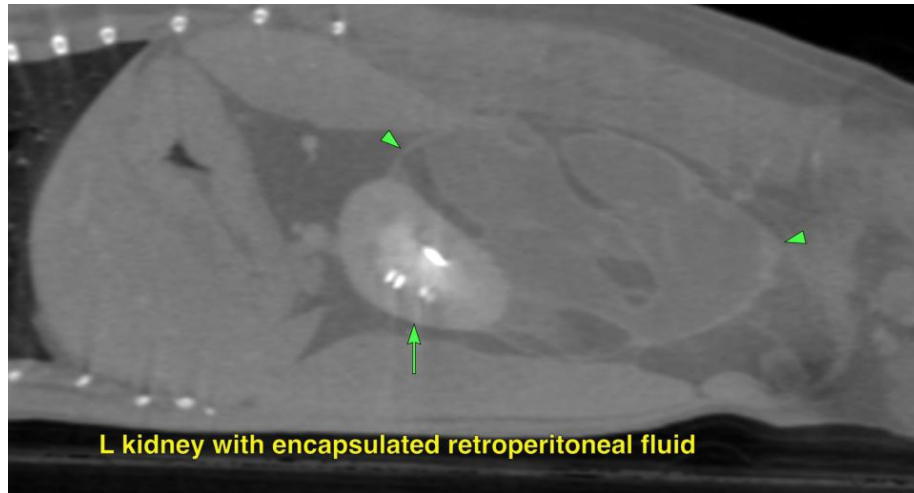
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differentiate pseudocyst from urinoma and abscess. Renal function assessment can be considered as well. At present, there is no evidence of ureteral obstruction.





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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.

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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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