



PATIENT PRESENTING CLINICAL SIGNS

Russo Parker Russo presents for a large bleeding subcutaneous mass over the left cranial shoulder and sternum. The mass was noticed when it began to bleed. Russo was seen previously for evaluation of left hind limb lameness. Previous CCL surgery with extracapsular suture performed years prior. Stifle instability was diagnosed and a TPLO scheduled. Inguinal masses (lipomas) were to be removed at the same time. Cranial sternal mass was not detected on physical or radiographs at that time. FNA performed by RDVM - inflammatory

SPECIES

Canine

BREED

Australian Cattle Dog

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Thorax

MN

The patient's body condition score is excessive.

AGE

13

An ill-defined ovoid soft tissue attenuating mass of approximately 10 x 8 cm is seen cranial to the sternum. Most of the mass is to the left of the midline, however, the mass extends to the right of the midline as well. Lesion margins are ill-defined. Extensive peripheral fat stranding and fluid accumulation is seen. The content of the mass appears to be fluid attenuating and contrast negative. Predominance of peripheral rim enhancement is noted.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

A moderately enlarged and rounded left cervical lymph node is seen.

Note the presence of multiple subcutaneous and intermuscular lipomas in the proximal thoracic limbs.

HOSPITAL NAME

Critical Vet
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Veterinary

Multiple up to 15mm sized soft tissue attenuating interstitial pulmonary nodules are distributed throughout the parenchyma of all lung lobes. Occasional pulmonary osteomas are seen.

Abdomen

There is a large ovoid soft tissue attenuating mass of approximately 9 x 6 cm lateral to the lumbar vertebrae L4 and L5. The mass is embedded within fatty tissue, however, directly adjacent to the axial musculature. Peripheral enhancement with a large contrast sparing center is seen. Lesion margins are ill-defined.

REFERRING VET

Dr. Young

Note the presence of large lipomas in the caudoventral abdominal wall and proximal rear limbs.

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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.

DATE

6-14-23

An approximately 2 x 1.8 cm sized ill-defined expansile mass of the left adrenal gland with multifocal mineralizations is seen. The mass appears to invade the left phrenicoabdominal vein



PATIENT

Russo Parker

and encompasses the caudal vena cava focally. No evidence of invasion of the caudal vena cava is seen at this point. The right adrenal gland presents within normal limits.

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

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

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

SEX

MN

- Large soft tissue masses cranial to the sternum and lateral to the lumbar spine meeting neoplastic criteria – suspect metastases of the presternal soft tissue mass.
- Multiple interstitial pulmonary nodules meeting metastatic criteria.
- Expansile mass of the left adrenal gland with vascular invasion meeting neoplastic criteria.
- Multiple lipomas.

AGE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are highly suggestive for metastasizing neoplasia. Soft tissue sarcoma with central tumoral necrosis is a primary differential diagnosis for both the sternal and lumbar soft tissue masses. Granuloma, abscess, and organizing hematoma can never be ruled out entirely but are considered highly unlikely here.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The findings of the left adrenal gland suggest presence of primary or secondary neoplasia such as pheochromocytoma, adenocarcinoma, or metastases. Note the presence of vascular invasion which is a malignancy criteria.

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The findings of the lung are highly suggestive for pulmonary metastases and should be considered so until proven otherwise.

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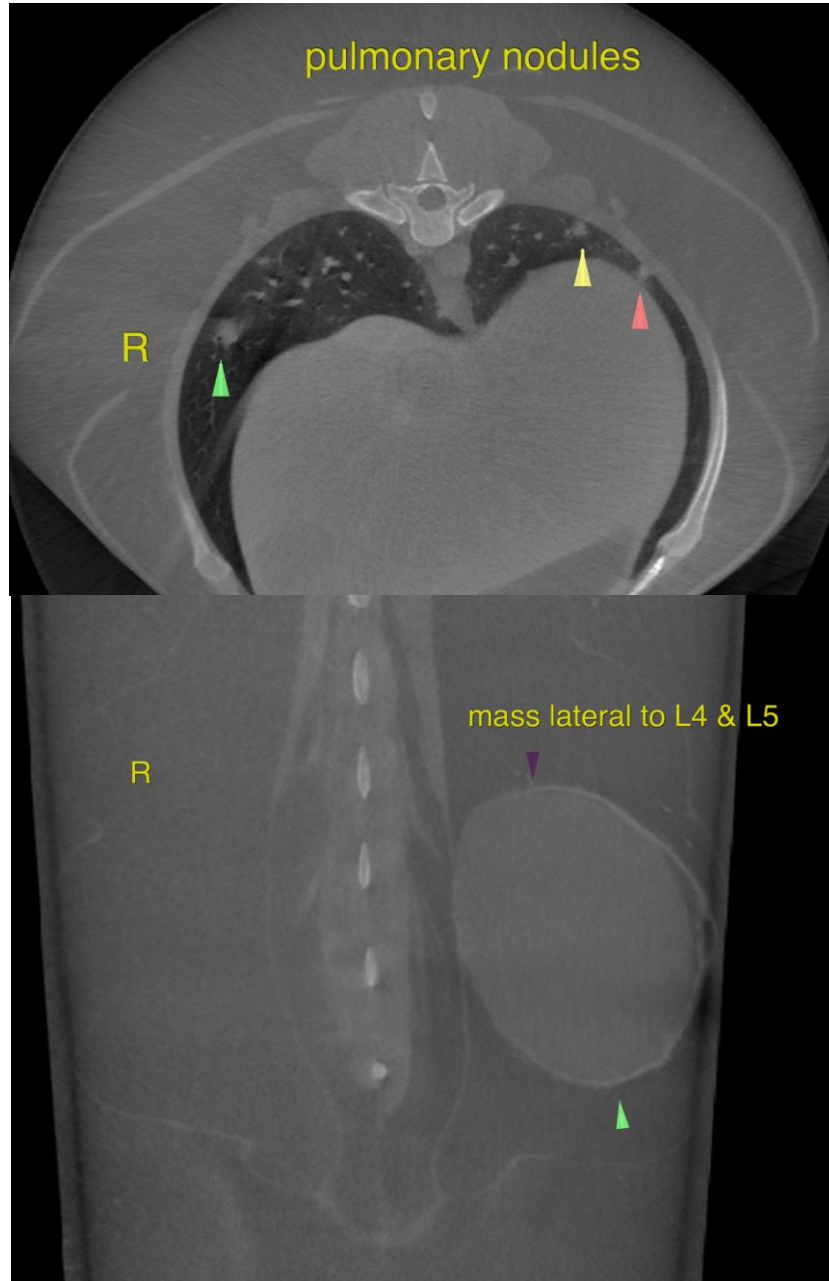
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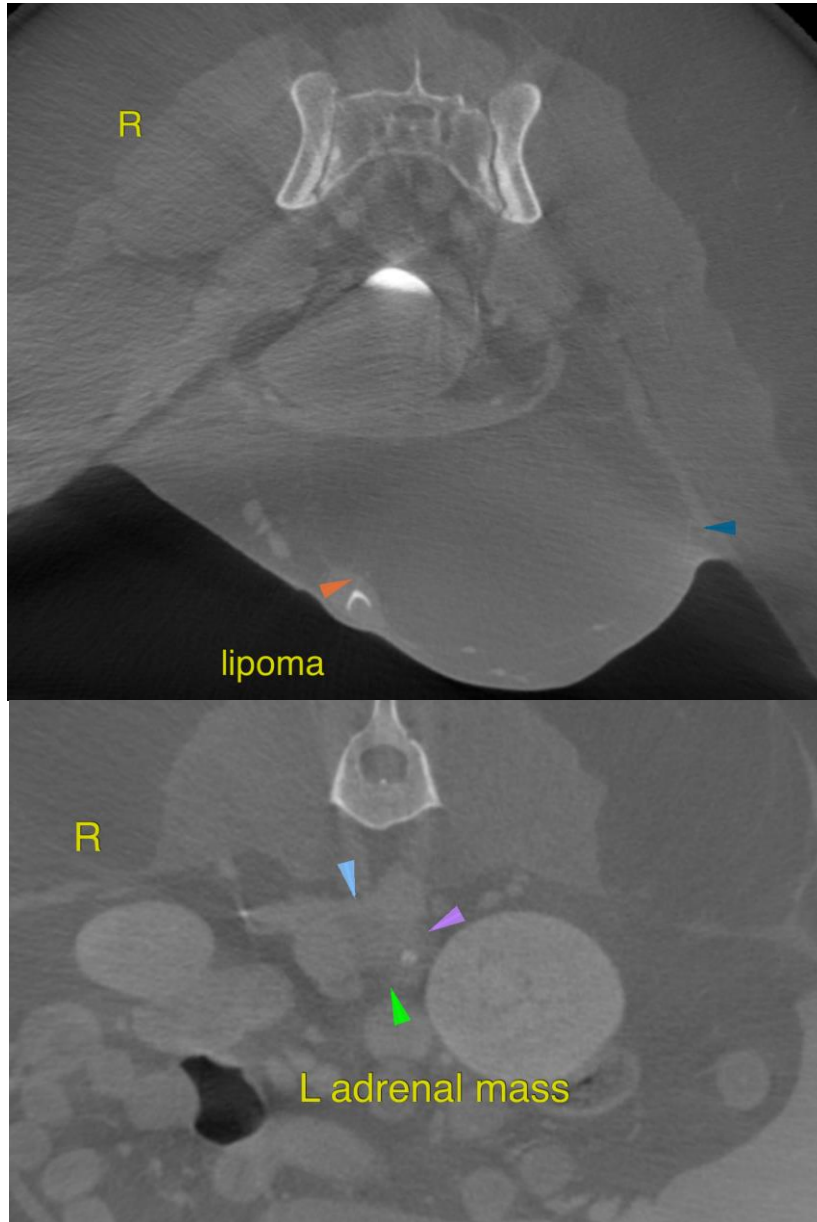
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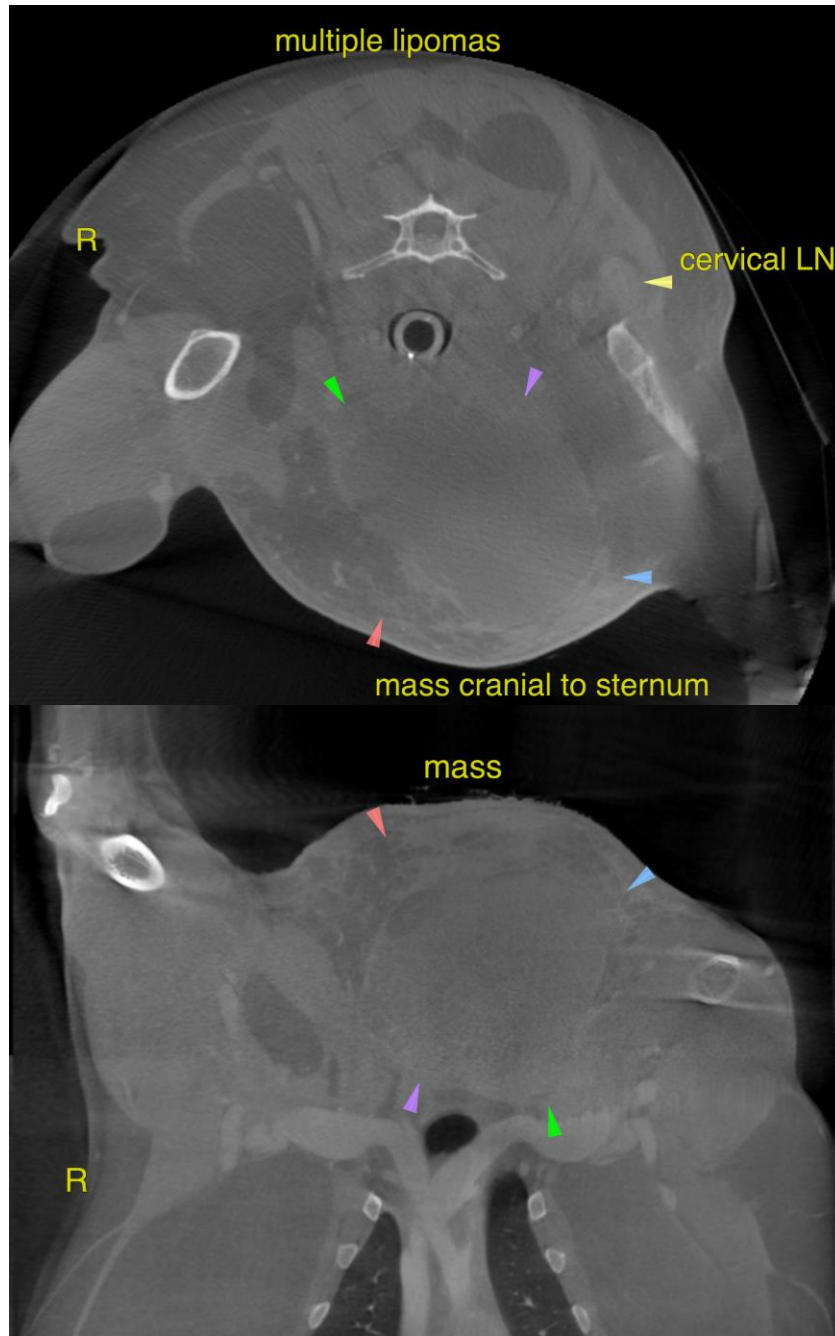
Dr. Young

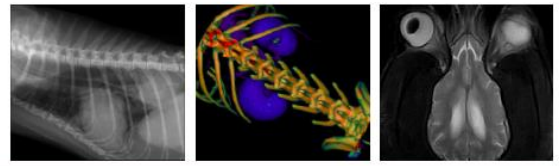
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

BREED

Australian Cattle Dog

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