



PATIENT

Sammy Arena

PRESENTING CLINICAL SIGNS

mass on mid ventral abdomen. History of diabetes mellitus.

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Post contrast studies available for review.

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

An ill-defined soft tissue attenuating mass with random mineralization is seen in the ventral abdominal midline. The mass appears to involve the layers of the abdominal wall as well as the peritoneum and measures approximately 3 x 2 cm.

SEX

Male

Multiple variably sized ill-defined mesenteric nodules are seen in proximity of the mass.

There is a 4 x 2 cm sized mass of the dorsal wall of the descending colon with ill-defined margins and loss of wall layering.

AGE

11 Years

A 2 cm sized hypoenhancing expansile mass of the splenic tail is seen.

Ill-defined retroperitoneal masses are seen in the right cranial abdomen measuring between 0.7 and 3 cm.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Thorax

The lung presents no evidence of interstitial pulmonary nodules or masses.

A moderate generalized bronchial lung pattern is seen.

The sternal lymph nodes are moderately enlarged.

HOSPITAL NAME

Animal Surgical
Center - Oceanside

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass of the ventral abdominal wall with mineralization meeting neoplastic criteria.
- Multiple mesenteric nodules.
- Mass of the colon with aggressive biological behavior.
- Mass of the spleen suggesting aggressive biological behavior.
- Retroperitoneal masses.
- Sternal lymphadenomegaly.
- Bronchial lung pattern.

REFERRING VET

Suffolk Animal
Hospital West Islip

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are highly suggestive for metastasizing neoplasia/ neoplasia with carcinomatosis. The mass within the ventral abdominal wall may represent the primary tumor. The multiple mesenteric and retroperitoneal masses are suggestive for metastases. The mass within the splenic tail may represent a primary tumor or metastases. The same applies to the colon; this may represent a primary neoplasia or metastases. Multicentric lymphomatous infiltrate is another

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potential differential diagnosis. Further definition by means of sampling such as FNA under ultrasonographic guidance could be considered if a final diagnosis is strived.

The sternal lymphadenomegaly may be reactive or neoplastic as in metastatic or lymphomatous.

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The bronchial lung pattern is likely unrelated to the remainder of the changes and suggests presence of chronic lower airway disease.

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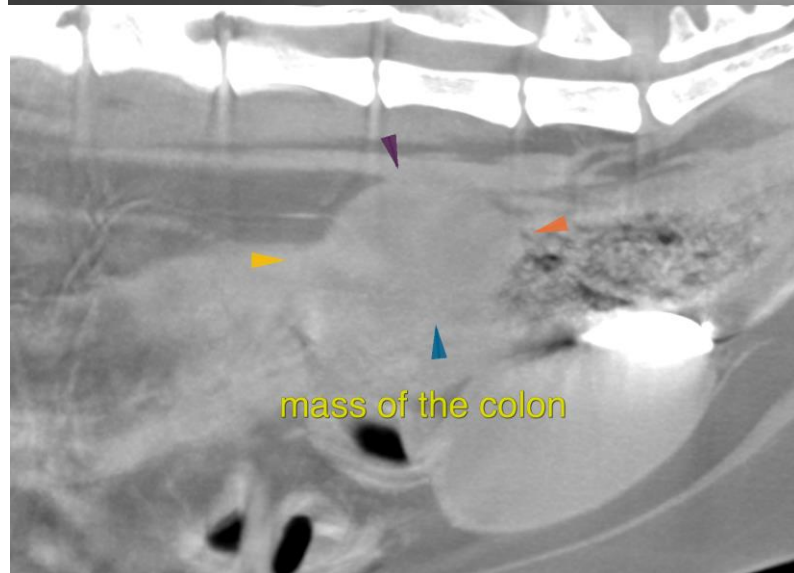
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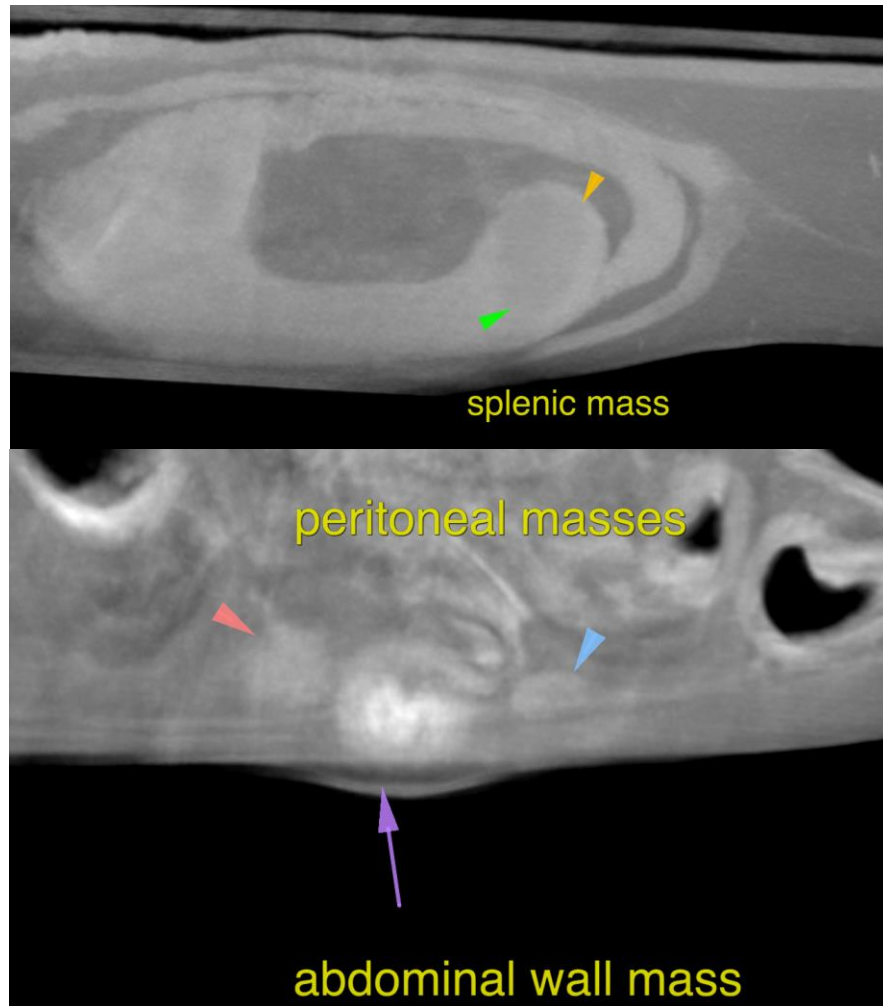
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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