



**PATIENT**

PJ Kilbey

**PRESENTING CLINICAL SIGNS**

Presented for lumpectomy Irregular blood panel prompting ultrasound - right adrenomegally noted  
Abnormal PE/Chem/CBC/UA Results: HypertriglyceraeMia

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN**

Plain and post contrast studies of the abdomen and plain study of the thorax in soft tissue and lung windows available for review.

**BREED**

Mixed

**COMPUTED TOMOGRAPHIC FINDINGS**

**Abdomen**

**SEX**

Female

A 1.2 x 1.0 cm sized slightly heterogeneously enhancing nodule is expanding the caudal pole of the right adrenal gland. The left adrenal gland presents within normal limits. No significant enlargement of the liver is noted.

**AGE**

15

The hepatic parenchyma presents uniform enhancement. The lobar margins of the liver lobes are pointed.

Multiple cysts and small cortical infarcts are seen within both kidneys.

Occasional hyperenhancing nodules are seen within the spleen.

The pancreas and abdominal lymph nodes present within normal limits.

The gastrointestinal tract and urinary bladder present within normal limits. A small mineral attenuating structure is seen in the gastric pylorus likely a piece of bone versus foreign object.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

Multiple mild to moderate spondyloses and chronic intervertebral disc protrusion are seen within the cranial lumbar spine.

There is bilateral stifle osteoarthritis with evidence of prior extracapsular repair of the cranial cruciate ligament in the left stifle.

**REFERRING VET**

Eamon

**Thorax**

A large subcutaneous lipoma is noted in the right thoracic wall.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio.

**INVOICE**

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The cardiovascular structures including the pulmonary vasculature are within normal limits.

**DATE**

8-22-22

No evidence of pulmonary metastatic disease is seen. There are multiple age related incidental pulmonary osteomas.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.



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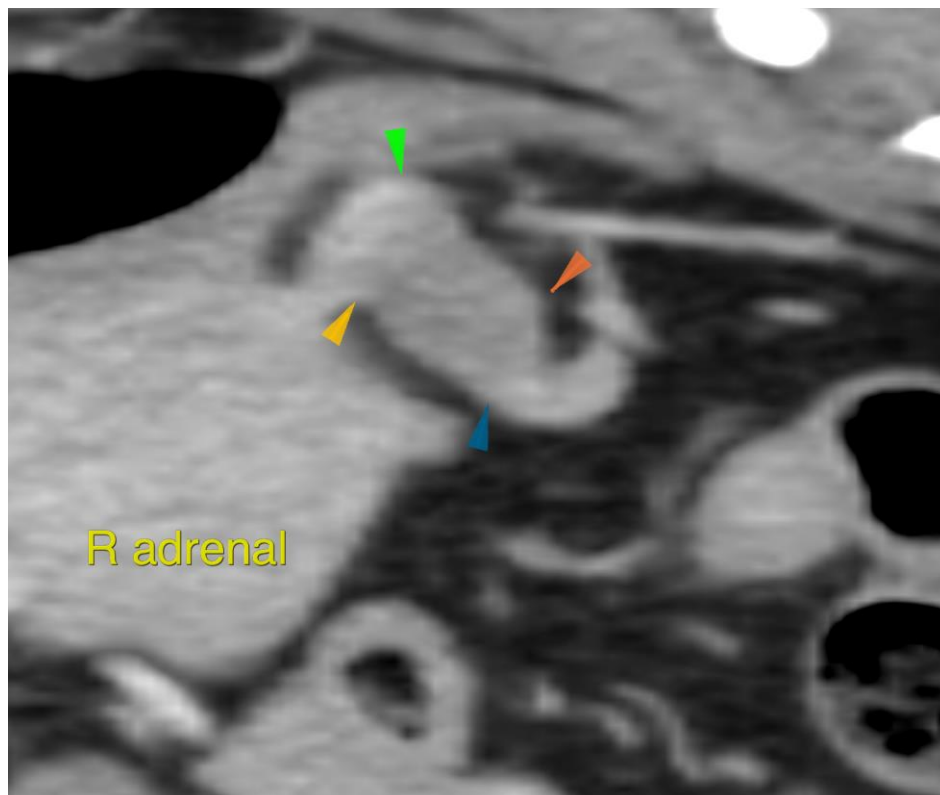
**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Expansile heterogeneously enhancing nodule within the caudal pole of the right adrenal gland.
- Splenic nodules.
- Cortical renal infarcts and cysts.
- Pulmonary osteomas.
- Spondyloses.
- Chronic intervertebral disc disease with protrusions in the cranial lumbar spine.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Differential diagnosis for the adrenal gland nodule includes myelolipoma, functional or nonfunctional adenoma/adenocarcinoma, pheochromocytoma, or incidentaloma. Further laboratory workup should be considered if not performed already. At this time, there is no evidence of vascular invasion into the lumen of the caudal vena cava.

Differential diagnosis for the splenic nodules includes benign nodular hyperplasia, extramedullary hematopoiesis, and a neoplastic infiltrate with the latter being considered unlikely based on the CT findings. Fine needle aspiration could be considered for further verification.





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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.

**SPECIES**

Canine

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