



PATIENT

Munchkin Boodmie

PRESENTING CLINICAL SIGNS

Munchkin presented for hypercalcemia and bladder stones.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, & ABDOMEN

Pre/post contrast studies provided for review.

BREED

Shihtzu

COMPUTED TOMOGRAPHIC FINDINGS

Head/neck:

A marked brachycephalic head formation is recognized with shortening of the nasal cavities, mild hyperplasia of the soft palate and hyperostosis of the skull bone. The neurocranium shows normal findings. Bony structures of the skull and the skull foramina of the cranial nerves are laterally symmetrical and inconspicuous.

SEX

MN

The right bulla is regularly ventilated. Both external ear canals are completely obliterated with soft tissue-dense partially mineralized material. The tympanic membrane on the right is respected. On the left side the filling of the ear canal extends into the bulla, which shows no residual ventilation.

AGE

4 Years

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

The adjacent temporomandibular joints and the nasopharyngeal meatus have no particular findings.

Frontal sinuses are not present. The orbital contents are laterally symmetrical without evidence of a retrobulbar lesion. Nasal cavities present swelling of the mucous membrane but are ventilated regularly. The maxillary/mandibular teeth show different stages of degenerative disease with marked periapical lyses for example of 404 and 108.

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Soft tissues of the head and neck are symmetrical and of homogeneous density, especially the mandibular and medial retropharyngeal lymph nodes. Both thyroid glands are inconspicuous.

Chest:

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The lungs show atelectasis of the ventral lung section and the complete right cranial lobe. Lungs have close contact to the inner thoracic wall on all sides. There is no evidence of pleural thickening, fluid accumulation or free pleural gas. Pulmonary density is within normal limits, there is no evidence of focal or nodular pulmonary lesions.

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The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. The thoracic trachea and esophagus present as expected. The diaphragm appears normal.

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The extra-thoracic soft tissues, spine as well as ribs and sternum are unremarkable. There is no evidence of bony lysis or abnormal sclerosis.



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Abdomen:

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The liver appears mildly enlarged but shows normal findings in terms of surface, shape and contrast behavior. The gallbladder is inconspicuous without evidence of cholestasis. The pancreas presents normal size and shape with a smooth surface. The peripancreatic fat tissue and omentum are inconspicuous.

BREED

Shihtzu

The spleen presents mildly rounded margins with at least one target lesion of 0.94 cm. The splenic texture is inhomogeneous with multiple spot-like areas of increased enhancement. Mild renal calcification is recognized bilaterally.

SEX

MN

The right adrenal gland impresses with an amorphous mass-like enlargement and invasion of the phrenicoabdominal vessel. Although having broad-based contact to the right adrenal the adjacent caudal vena cava appears inconspicuous as far as can be assessed. The left adrenal gland is in normal limits.

AGE

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As far as can be assessed, the stomach and all parts of intestine are regularly presented without any indication of a wall thickening or a mass. There are no signs of an obstructive or functional ileus.

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Ureters, urinary bladder, trigonum and urethra are presented as expected. There is a small amount of cystic calculi suspected. The prostate shows normal findings. The anal sacs are markedly filled but inconspicuous.

Abdominal lymph nodes and abdominal vessels have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right adrenal mass with suspected invasion of the phrenicoabdominal vessel
- Normal pituitary gland, thyroid and anal glands
- Target lesion spleen, mild splenomegaly
- No evidence of pulmonary/mediastinal metastasis
- Periapical teeth root inflammation/abscesses (s. for example 404/108)
- Severe sign of a bilateral, chronic and active otitis externa (and -media left side)
- Mild renal calcification and cystic calculi
- Mild hepatomegaly

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Final assessment of the right adrenal lesion (benign, malignant; functional, non-functional) is not possible and a matter of clinical presentation, the temporal evolution and urine/blood tests. I favor a malignant lesion invading the adjacent vessels, currently the phrenicoabdominal vein. Differentials include but are not limited to adenocarcinoma and pheochromocytoma. This finding



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likely correlates with the reported hypercalcemia since all other endocrine glands are normal from a CT perspective.

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Spleno- and hepato-megaly are unspecific. However, the target pattern of the splenic lesion indicates a nodule as seen with neoplasia/metastases. Benign nodular lesions include extramedullary hematopoiesis and/or benign lymphoid hyperplasia and are possible as well. Final assessment is a matter of the temporal course (sonographic follow-up in 6 weeks) and ultrasound guided FNA.

BREED

Shihtzu

Findings of the teeth and ears are somewhat breed-expected and need to be correlated with the clinical presentation. The renal calcifications and the cystic calculi are thought incidental in this case.

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The atelectasis of the right cranial lung lobe and the ventral lung parts is still consistent with atelectasis due to anesthesia and positioning in lateral recumbency prior to CT.

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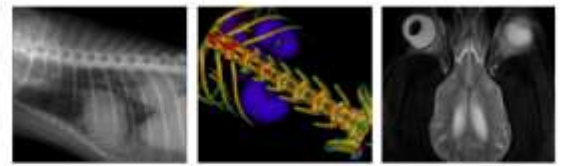
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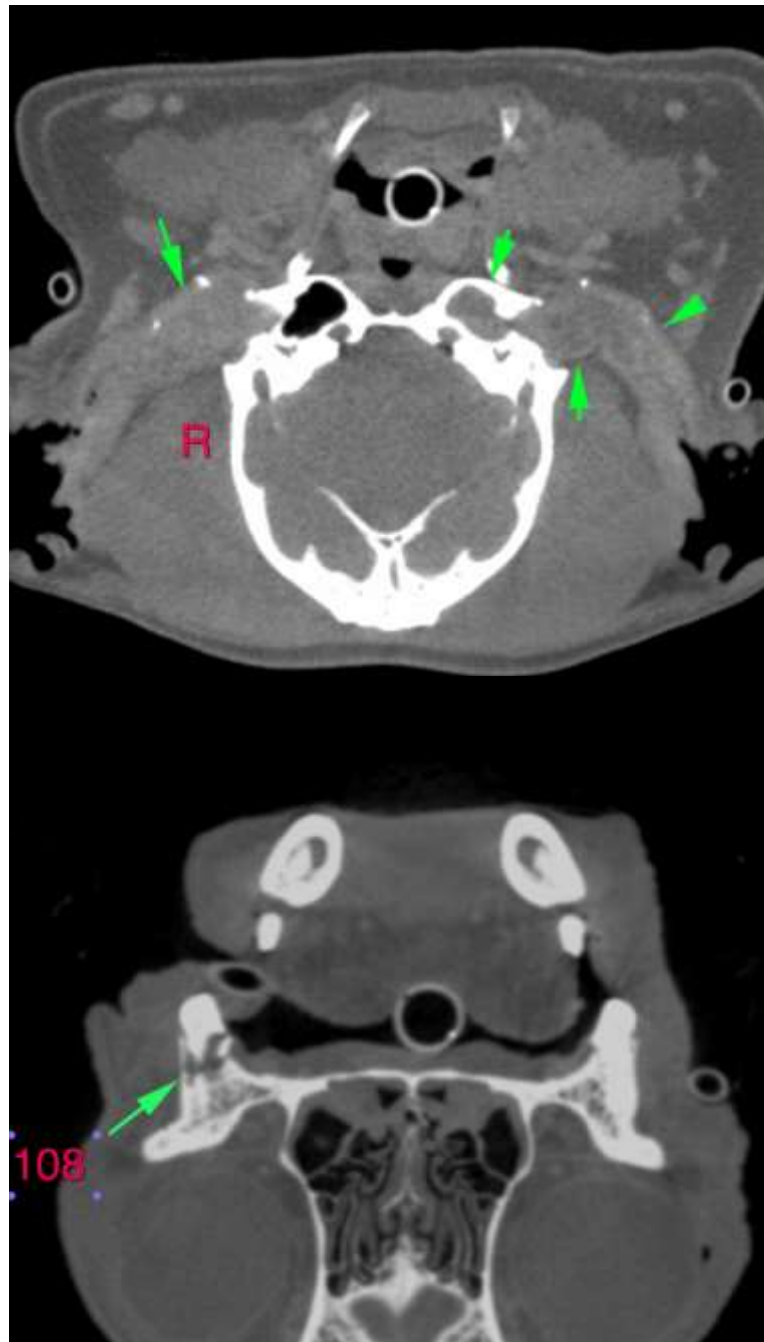
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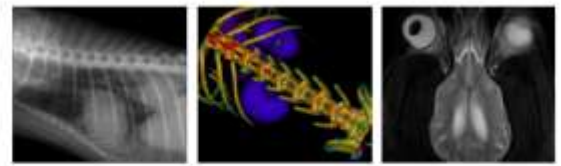
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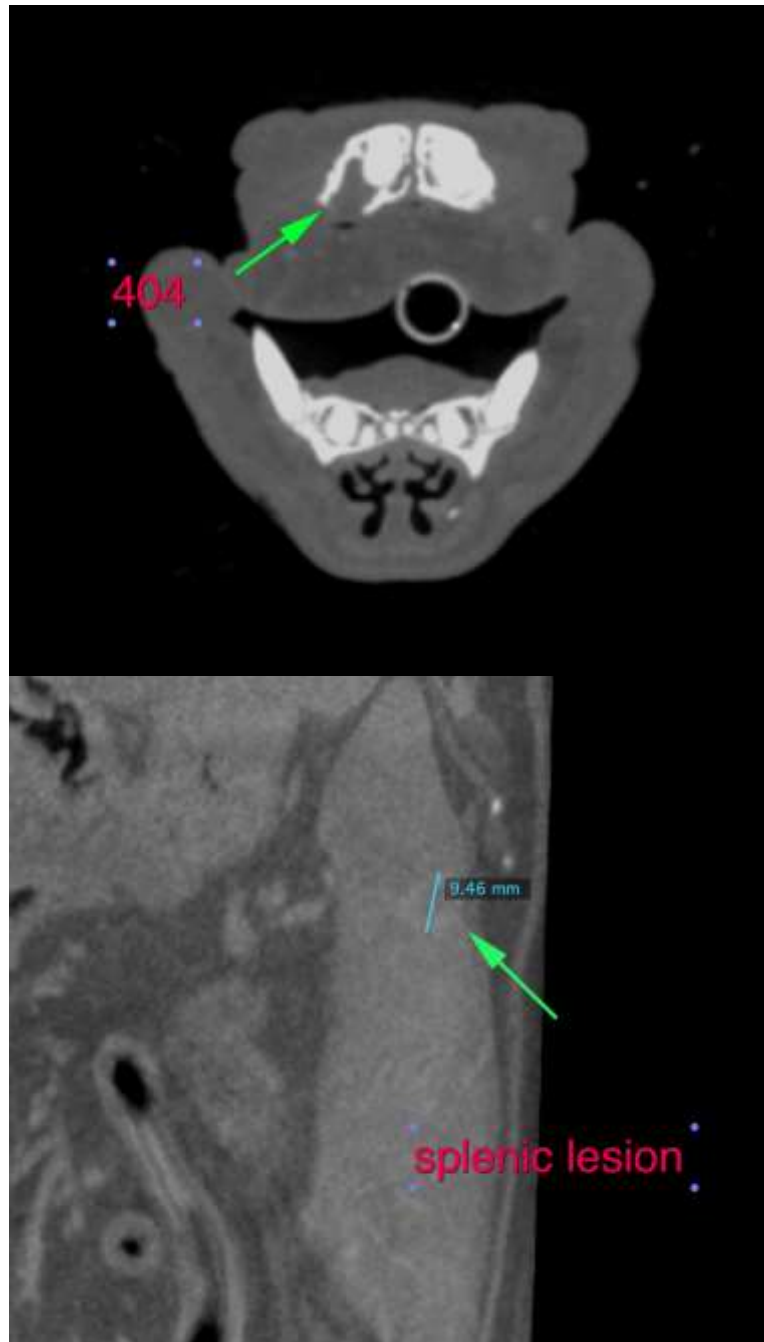
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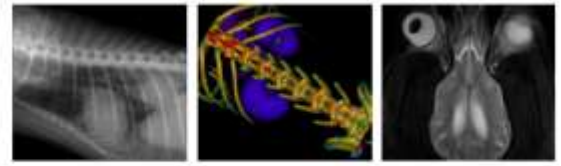
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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