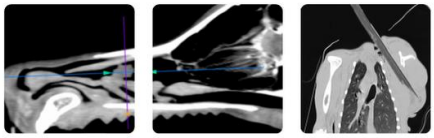

PATIENT

George Gooch

SPECIES

Canine

BREED

Mastiff X

SEX

MN

AGE

9

WEIGHT

30

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen Veterinary Centre

REFERRING VET

Eamon

INVOICE

73776

DATE

2-15-26

PRESENTING CLINICAL SIGNS

- hemipelvectomy for neoplasia - not specified by owner
- intermittent yelping suspect in the back
- nerve reflex nrmal fore exaggerate LN

Abnormal PE/Chem/CBC/UA Results: cbc/chem wl

COMPUTED TOMOGRAPHY OF THE SPINE, PELVIS, THORAX, & ABDOMEN

Pre/post contrast studies are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Spine

The spine shows a harmonic course with an inconspicuous density of the vertebral bodies and evenly spaced intervertebral discs. A compressive lesion of the spinal cord or cauda fibers is not noted. There is no pathologic enhancement recognized.

The paraspinal soft tissues present a mildly asymmetric musculature with a reduced muscle volume on the right side, especially in the caudal lumbar region.

Pelvis & Abdomen

Status after hemipelvectomy on the right side with amputation of the right hind limb. The bony margins of the residual pelvic bones are clearly defined and unremarkable. Both sacroiliac joints present moderate degeneration. There is severe muscle atrophy of the psoas and gluteal musculature noted on the right side. Moderate enlargement of the right sacral lymph node is recognized.

The medial inguinal lymph nodes are inconspicuous. The abdominal structures do not show particular findings. The displayed abdominal organs and lymph nodes are within normal limits. Free peritoneal fluid is not noted. The abdominal vessels show normal findings.

Thorax

The left caudal lung lobe presents a single nodular lesion of 1.2 cm being clearly defined and presenting soft tissue density. The mediastinal lymph nodes, especially in the perihilar region, are inconspicuous. The heart base does not show particular findings. The other parts of the lungs are unremarkable. The pleural fluid is not noted. The thoracic borders are intact including the diaphragm.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate enlargement right sacral lymph node
- Severe atrophy right pelvic musculature
- Single nodular lesion left caudal lung lobe

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- Degenerative findings sacroiliac joints (age expected)

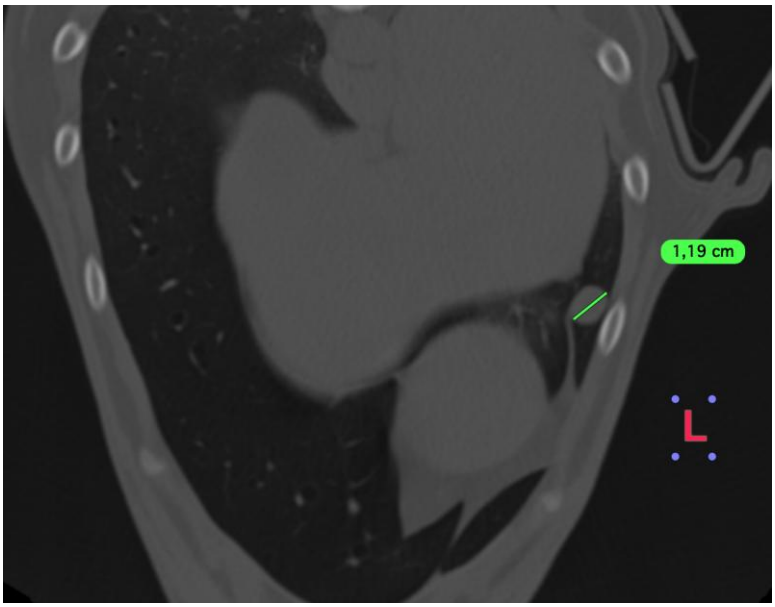
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The enlargement of the right sacral lymph node must be correlated with the time of surgery and the histopathologic findings. Given the history of a neoplastic lesion in the right pelvic region, this is suspicious for a neoplastic/metastatic lymph node. Reactive lymphadenitis is another common differential and occurs after surgery within the time of wound healing.

The severe atrophy of the musculature is likely due to inactivity. The hypodense muscles and reduced muscle volume would underline this assumption and present fat replacement and atrophy. A pathologic enhancement is not noted. With that, an invasive or aggressive lesion currently cannot be identified.

The single nodular lesion in the left caudal lung lobe is an unspecific finding from a CT perspective. A metastasis is possible as well as granulomatous lung disease and post-inflammatory changes. An active inflammatory lesion is less likely.

For further assessment, an ultrasound-guided FNA of the right sacral lymph node could be performed next. Regular radiologic follow-ups of the chest could be performed to rule out a progressive process of the lungs. The nodule has contact to the pleural surface and should be detectable with ultrasound. However, sampling of the lung nodule is difficult due to its size and proximity to the diaphragm and liver.



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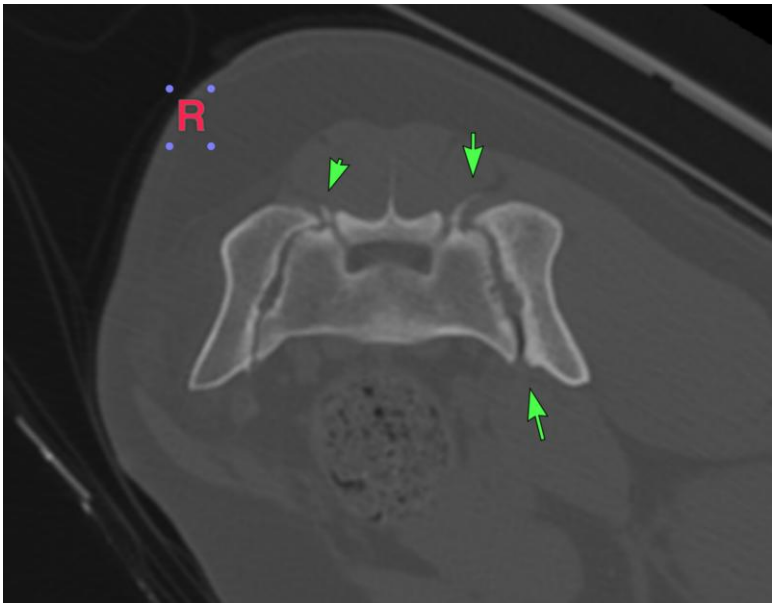

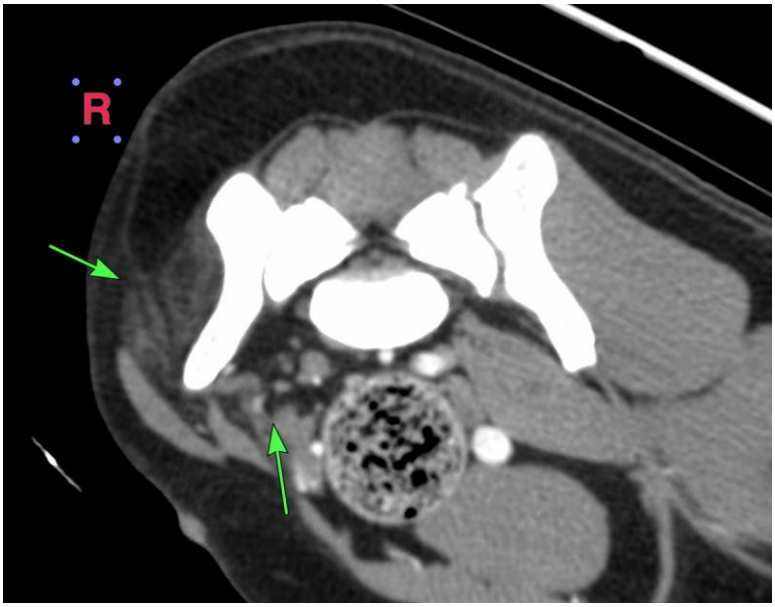

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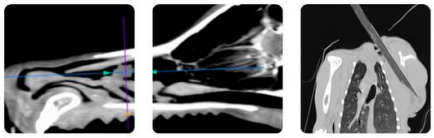

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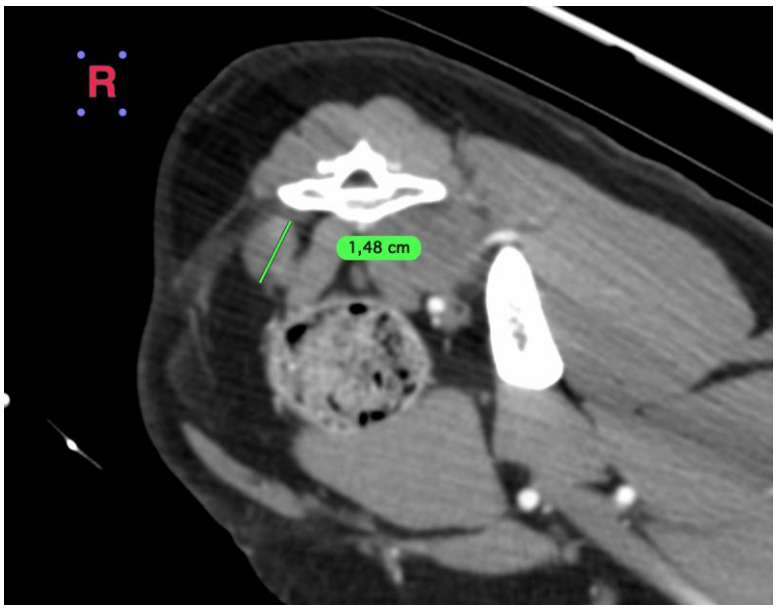

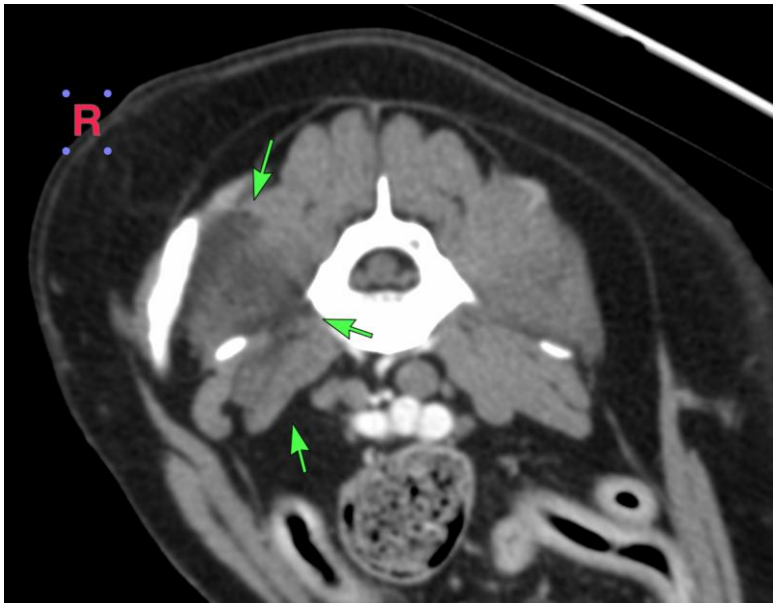

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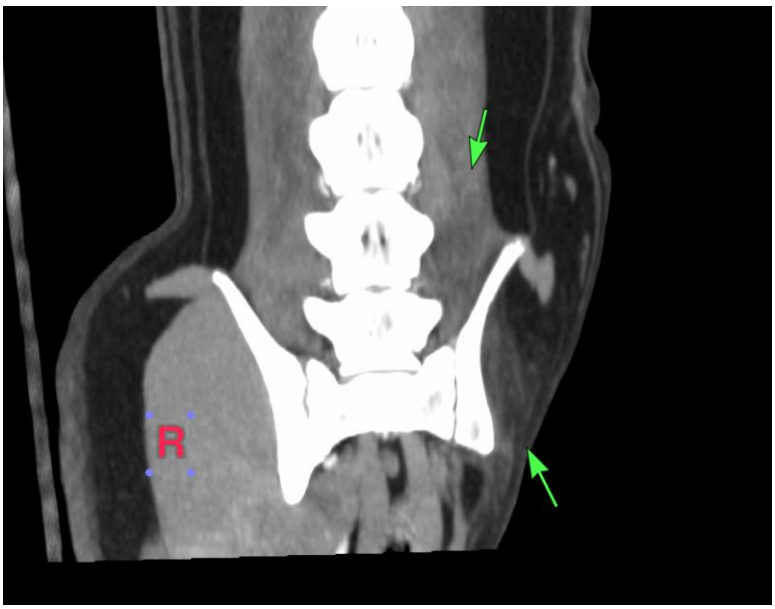

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com