



**PATIENT PRESENTING CLINICAL SIGNS**

**Bow Burton** History: \*DVM pet. Mass found on the left cranial abdomen. CT for surgical assessment Hx of non-specific hepatic disease (elevated ALKP), all screening for hyperadrenocorticism has been negative. Hx of cutaneous mast cell tumor treated surgically.

**SPECIES**

Canine

**BREED**

German SH Pointer

**SEX**

Neutered Male

**AGE**

12 Years 4 Months

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

The liver presents mildly rounded margins. The papillary process of the caudate lobe shows a rounded to amorphous mass of 4.8 x 5.6 cm. The peripheral structures are unremarkable. The portal lymph nodes are mildly enlarged but inconspicuous in shape and contrast behavior. The gallbladder is inconspicuous without evidence of cholestasis.

The spleen appears enlarged showing a large, rounded mass in the cranial section of the spleen measuring approximately 7.6 x 5.4 cm, again with an inconspicuous periphery. Serosal detail is intact without signs of peritoneal effusion.

Pancreas presents normal size and shape with a smooth surface.

Unremarkable presentation of the bilaterally symmetrical kidneys.

Adrenal glands are in normal limits.

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet Specialist  
in Diagnostic Imaging

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.

Ureters, urinary bladder, trigonum and urethra are presented as expected, prostate shows normal findings.

**HOSPITAL NAME**

Mobile Pet Imaging

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

**REFERRING VET**

Meaux

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Large splenic mass 7.6 x 5.4 cm, unspecific splenomegaly
- Liver mass caudate lobe 4.8 x 5.6, unspecific hepatomegaly
- Mild portal lymphadenitis

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

12724

The CT findings most likely present splenic neoplasia (for example hemangiosarcoma) currently without evidence peritoneal effusion/abdominal hemorrhage. Compelling signs of a peritoneal metastatic spread are not detected. Enlargement of the portal lymph nodes still could be

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reactive/inflammatory. Differentials include nodular hyperplasia, splenic hematoma and malignant neoplasia such as hemangiosarcoma. Please rule out pulmonary/mediastinal/heart metastasis.

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Liver findings could be chronic and represent nodular hyperplasia/regenerative changes. Malignant neoplasia cannot be fully excluded, a metastasis of a splenic tumor is possible but unlikely from a CT perspective.

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Surgery should include resection of the caudate lobe and biopsy of the portal lymph nodes.

**BREED**

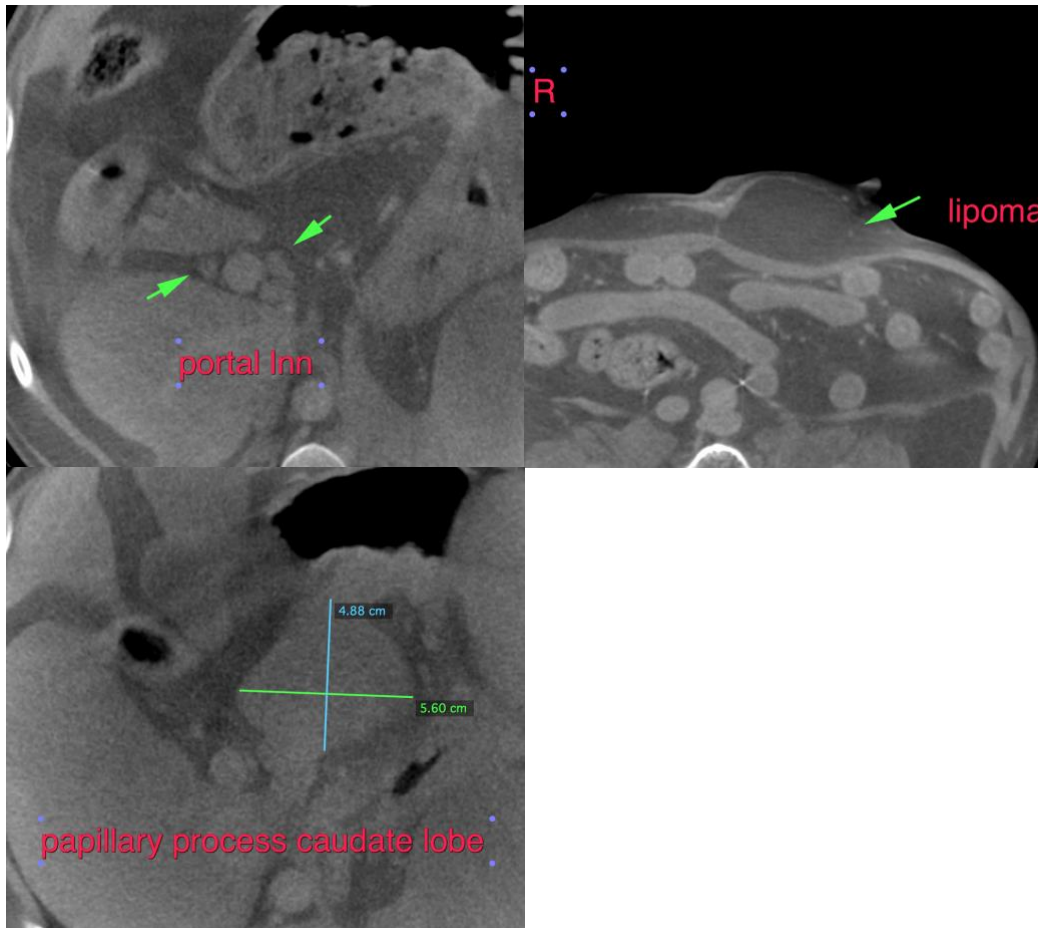
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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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.

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

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