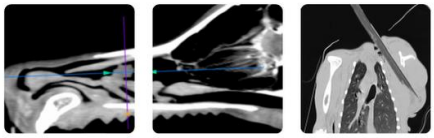


PATIENT

Toby Ging

SPECIES

Canine

BREED

Chihuahua

SEX

MN

AGE

13

WEIGHT

2.8

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Patricia Sanchez Sanchez

HOSPITAL NAME

Animal Trust - Bolton

REFERRING VET

Patricia Sanchez Sanchez

INVOICE

73408

DATE

1-21-26

PRESENTING CLINICAL SIGNS

History:

- Liver enzymes severely increased in blood. Seizures.
- Chronic gallbladder diseases.
- Lethargic

COMPUTED TOMOGRAPHY OF THE SKULL AND ABDOMEN

A high resolution pre- and post-contrast CT study of the skull and abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent. Triadans 105, 106 and 210 present a moderate widened periodontal space.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. In the horizontal segment of the right external ear canal, soft tissue material is attached to the ventral wall of the ear canal.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and contrast enhancement pattern. The ventricular system is non-dilated and symmetric.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis. A separate right & left caudal vena cava of the pre-renal segment is seen.

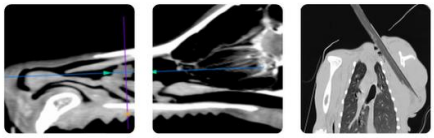
Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

In the caudal extremity of the spleen, segmental convex bulging of the splenic margins is appreciated – due to focal nodular enlargement of the spleen, measuring 3 cm in diameter. The splenic parenchyma is uniform soft tissue attenuating and contrast enhancing, but mild perivascular mineralization in the hilar region of the spleen.

The hepatic volume is increased, the caudoventral hepatic margins are rounded and are protruding caudally beyond the costal arch. The gastric axis is deviated caudally. The hepatic parenchyma has a homogeneous soft attenuation pattern and contrast enhancement.

In the gallbladder a small amount of irregular mineral attenuating material is visible. The common bile duct is dilated, measuring up to 8 mm and can be appreciated up to the major duodenal papilla.



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The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Hepatomegaly
- Mild cholecystolithiasis and dilation of the common bile duct without evidence of mechanical obstruction
- Soft tissue nodule caudal extremity of the spleen
- Soft tissue material in right ear canal – recommend otoscopy to differentiate between cerumen or polypoid soft tissue mass
- Periodontal disease 105, 106 and 210
- Multiple absent teeth
- Double caudal vena cava, pre-renal segment
- Normal brain

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potentials for the hepatomegaly include metabolic hepatic disease, hepatitis or diffuse neoplastic infiltration. In case of doubt, ultrasound guided FNA sampling and/or Tru-cut biopsy can be used as minimally invasive methods for further workup.

The soft tissue nodule of the spleen can present benign nodular hyperplasia, however primary splenic soft tissue neoplasia is a differential, such as round cell tumor, sarcoma. FNA sampling of the splenic nodule may be performed for specification. Splenectomy may be considered, independent of the dignity of the mass both benign and malignant lesions of the spleen can rupture and cause abdominal hemorrhage.

In the present study of the brain there is no evidence of macromorphological disease, which supports the presumptive diagnosis of idiopathic/cryptogenic epilepsy. If not yet done so the workup should be complemented by examination of CSF and complete bloodwork to screen for brain disease that is not necessarily associated with structural changes of the brain parenchyma and rule out hepatoencephalopathy and other systemic illness. In case of the strong clinical suspicion of structural intraparenchymal changes an MRI may be considered.

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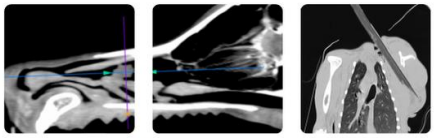

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SonoPath.com info@sonopath.com 1.800.838.4268

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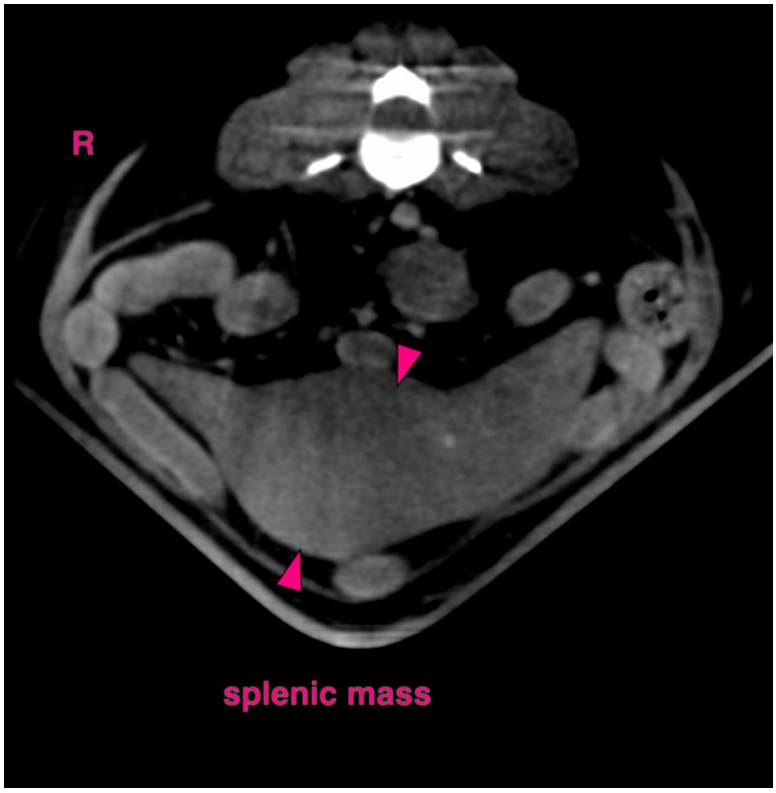

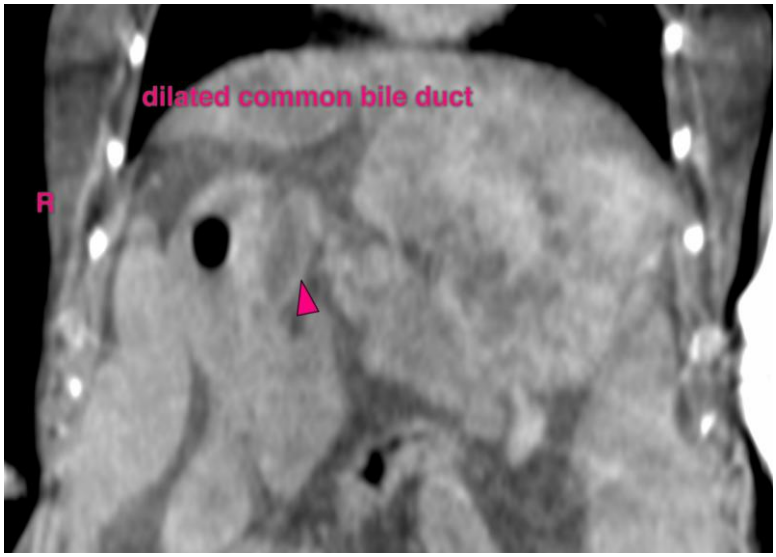

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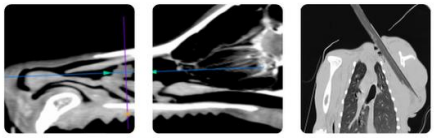

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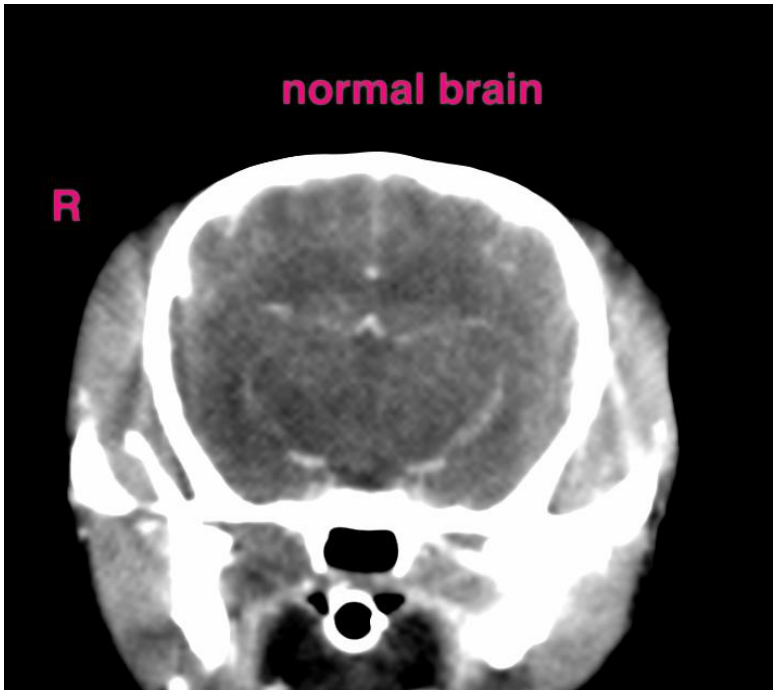

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com