



PATIENT PRESENTING CLINICAL SIGNS

Qimi Recht right renal mass

SPECIES COMPUTED TOMOGRAPHY OF THE ABDOMEN

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

BREED COMPUTED TOMOGRAPHIC FINDINGS

DSH The serosal fat presents generalized fat-stranding and increased soft tissue attenuating.

Both kidneys present irregular margins. After contrast administration a hypoattenuating parenchymal filling defect is seen in the renal cortex of the left kidney.

SEX
Female In the right cranial abdomen, a large, multilobulated, uniform soft tissue attenuating and heterogeneous contrast enhancing - peripherally accentuated, demarcating a hypoattenuating centered - mass is visible measuring 4.3 x 4.3 x 6.0 cm in size. The small intestinal loops are displaced centrifugally by the mass effect.

AGE
12 The ileum presents a prominent outer layer, and the surrounding peritoneal fat is soft tissue attenuating. The ileocecal lymph nodes are prominent.

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

Multifocal throughout the hepatic parenchyma well and ill-defined hypoattenuating lesions of variable size are visible.

HOSPITAL NAME

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Multifocal moderate spondylosis formation is seen along the lumbar spine. The right 13th rib presents with a well-defined mineralizing mass protruding cranially and caudally from the costal surface, measuring up to 12 mm in size.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Dr. Pepen

- Right cranial abdominal mass – suspect origin in mesenteric lymph node
- Mural thickening of the ileum with surrounding focal peritonitis and lymphadenopathy of the ileocecal lymph nodes
- Generalized peritonitis/mild peritoneal effusion
- Hypoattenuating hepatic parenchymal lesions
- Suspect osteochondroma 13th right rib
- Left sided renal cyst
- Chronic nephropathy
- Spondylosis deformans

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DATE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with a peritoneal mass, most likely originating from a mesenteric lymph node. The odds for neoplastic transformation, such as round cell tumor, with possible



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necrotic center are high. However, due to the hypoattenuating center, abscessation of a mesenteric lymph node is a potential as well. Recommend FNA sampling for further definition.

The mural thickening of the ileum and the enlarged mesenteric lymph nodes are equivocal for underlying inflammatory changes – e.g. ileitis – or neoplastic invasion (e.g. round cell tumor).

SPECIES

Feline

The hepatic lesions are most consistent with hepatic cysts and possible cystadenoma. To rule out metastatic spread, FNA sampling of the liver is recommended.

BREED

DSH

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Female

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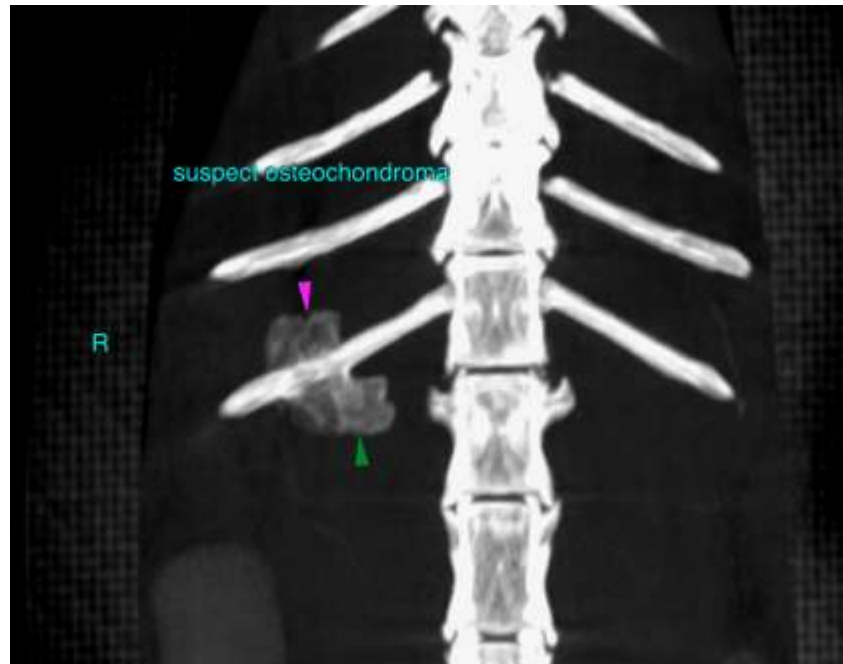
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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