



PATIENT

Otto Knox

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10

WEIGHT

25

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Eamon

INVOICE

73234

DATE

1-6-26

PRESENTING CLINICAL SIGNS

reduced appetite 2wks, 5% loss body weight dental performed 5days ago marked pyrexia, reduced lung sound right side chest

Abnormal PE/Chem/CBC/UA Results: cbc mod neutrophilia chem mild increase BUN

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

Along the thoracic and lumbar spine, multifocal spondylosis formation is seen.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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.

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

The liver is normal in size and shape. The hepatic parenchyma is uniform soft tissue attenuating and has a generalized heterogeneous contrast enhancement pattern. In the gallbladder a small amount of sedimented mild hyperattenuating sludge is seen. The gallbladder wall is thickened, measuring 2.9 mm in width.

The hepatic lymph nodes are mildly prominent.

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.



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Both coxofemoral joints present moderate to marked osteophyte new bone formation. The acetabular groove bilaterally is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Heterogeneous contrast enhancement pattern of the hepatic parenchyma
- Mild edematous swelling of the gallbladder wall
- Mild lymphadenopathy hepatic lymph nodes – suggestive for reactive lymphoid hyperplasia
- Osteoarthritis coxofemoral joints due to hip dysplasia
- Spondylosis deformans

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The heterogeneous contrast enhancement pattern of the hepatic parenchyma along with the mild swelling of the gallbladder wall can be indicative for hepatitis/cholangiohepatitis ± metabolic hepatic disease. Theoretically diffuse neoplastic infiltration of the hepatic parenchyma is a differential, but the odds are lower. Ultrasound guided FNA sampling of the liver can be performed as minimally invasive advanced diagnostic tool.

No additional abnormalities are appreciated, that do explain the presenting clinical signs and laboratory findings.





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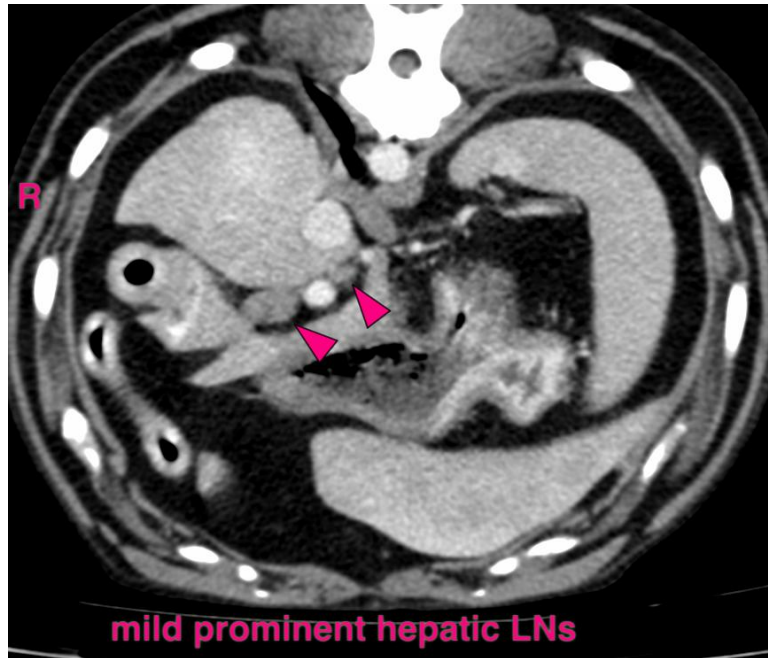
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com