



**PATIENT PRESENTING CLINICAL SIGNS**

**MACEY FAY LIVA**  
 History: In July 2021, pet was diagnosed with an intestinal mass- R/A was done. Biopsy showed spindle cell sarcoma- complete excision, no lymphatic invasion, no evidence of neoplastic cells in regional LN. Pet presented again 9/27/21 for diarrhea. Abdominal ultrasound showed a 3cm mass in the R or caudate liver lobe. A CT was recommended to fully assess the liver mass, previous sx site and LN's prior to considering surgery again.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results:

**BREED COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

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

**SEX COMPUTED TOMOGRAPHIC FINDINGS**

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

**AGE**

11 Years

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 left adrenal gland is within normal limits for size, shape and organ architecture. Mild nodular enlargement of the caudal pole of the right adrenal gland is noted, presenting a mild heterogeneous contrast enhancement pattern and measuring 6.8 mm in diameter.

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**HOSPITAL NAME**

Wilson VH

The left lateral liver lobe presents two mild irregular roundish, pre- and post-contrast parenchymal filling defect measuring up to 6.5 mm in size. A roundish, irregular contrast enhancing nodule is visible in the mediocaudal aspect of the caudate process of the caudate liver lobe, measuring 2.2 cm in diameter. The remainder of the hepatic parenchyma are within normal limits for size, shape and attenuation and contrast enhancement pattern.

**REFERRING VET**

Dr. Nick Vitale

A mild amount of gravity dependent biliary sludge is visible in the gallbladder.

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

**INVOICE**

13940

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

No abnormalities of the mesenteric lymph nodes are appreciated.

**DATE**

10/21/21



**PATIENT** L1 presents with a transverse process bilaterally and a small floating rib in the left aspect. The intervertebral disc space T11/T12 is collapsed and there is a step formation between T12/T13 with T13 being in a mild ventral position, the facet joints are significantly widened. The subchondral bone of the vertebral endplates T12/T13 presents moderate sclerosis and spondylosis formation.

Macey Fay Liva

**SPECIES** All pictured intervertebral discs of the lumbar spine are mild to moderately protruding into the vertebral canal, distorting the dural tube at the same level.

Canine

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**BREED**

Pug

- Solitary hepatic mass, caudate liver lobe
- Mild nodular enlargement right adrenal gland
- Hepatic cysts
- Mild chronic ventral subluxation of T13
- Biliary sludge

**SEX**

Spayed Female

- Generalized intervertebral disc protrusions along the lumbar spine with potential compressive myelopathy

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

11 Years

The solitary hepatic mass with the given history of an intestinal sarcoma can represent metastasis, primary hepatic neoplasia – such as hepatocellular adenoma/carcinoma, neuroendocrine tumor, cholangiocellular carcinoma, other – or nodular hyperplasia/regeneration nodule (less likely). Complete surgical excision of the mass by partial amputation of the respective liver lobe appears feasible –the mass is in direct contact with the caudal vena cava and a hepatic vein coursing directly along the cranial aspect of the mass potentially increasing the risk for hemorrhage.

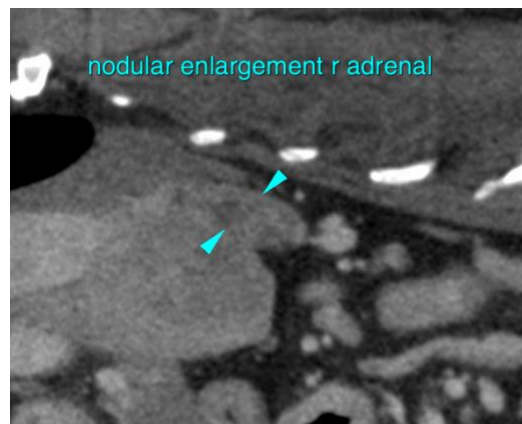
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The mild nodular enlargement of the right adrenal gland is not specific and potentials include (non)functional macronodular hyperplasia or neoplasia (primary versus metastasis).

**HOSPITAL NAME**

Wilson VH



nodular enlargement r adrenal

**REFERRING VET**

Dr. Nick Vitale



ventral subluxation T13

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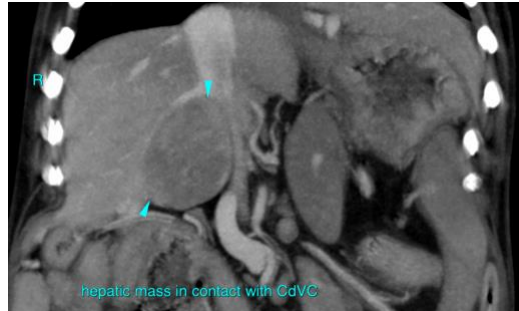
**DATE**

10/21/21



**PATIENT**

Macey Fay Liva



**SPECIES**

Canine

**BREED**

Pug

**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.**

**SEX**

Spayed Female

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  
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**AGE**

11 Years

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
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**HOSPITAL NAME**

Wilson VH

**REFERRING VET**

Dr. Nick Vitale

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**DATE**

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