



PATIENT

Scarlet Richardson

SPECIES

Canine

BREED

Golden Retriever

SEX

Spayed Female

AGE

13 Years

WEIGHT

31.2 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Janice

HOSPITAL NAME

Bridgwater VH & WC

REFERRING VET

Dr. K.Teerhius

INVOICE

35471

DATE

11/10/25

PRESENTING CLINICAL SIGNS

History: Original CT done Sept 29/25. Surgical oncologist requests a repeat CT of cranial abdomen as they require to view the mass in its entirety for appropriate surgical planning.

Abnormal PE/Chem/CBC/UA Results: Decreased hct 34.1%, hgb 11.9 g/dl, Increased alt 327 U/L, alpk 649 U/L, GGT >952 U/L, amyl 1812 U/L, lipa 3307 U/L

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

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.

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

Originating from the caudate process of the caudate liver lobe, a multilobulated, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is seen, measuring approximately 10.1 x 8.8 x 12.7 cm. The caudal vena cava level with the hepatic mass is distorted. In the ventral aspect of the right medial liver lobe and quadrate liver lobe, a post contrast mild hypoattenuating ill-defined nodular area is visible, measuring 15 mm in diameter. The peritoneal fat adjacent to the hepatic mass presents mild fat stranding.

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.

Along the lumbar spine, multifocal spondylosis formation is seen. The intervertebral discs L6/L7 and L7/S1 are bulging into the vertebral canal, occupying approximately up to 50% of the cross-sectional area of the vertebral canal at the same level.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multilobulated hepatic soft tissue mass, caudate process – progressive in size
- Post contrast hypoattenuating hepatic parenchymal nodules right medial & quadrate liver lobe – not appreciated in preceding CT series
- Intervertebral disc protrusion L6/L7 and L7/S1 with possible dynamic myelocompression
- Spondylosis deformans

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study presents a mild increased volume of the right divisional hepatic soft tissue mass in comparison to the preceding CT series. The mass is extending up to the hilar region of the caudate process of the liver; there is no sign of vascular invasion.



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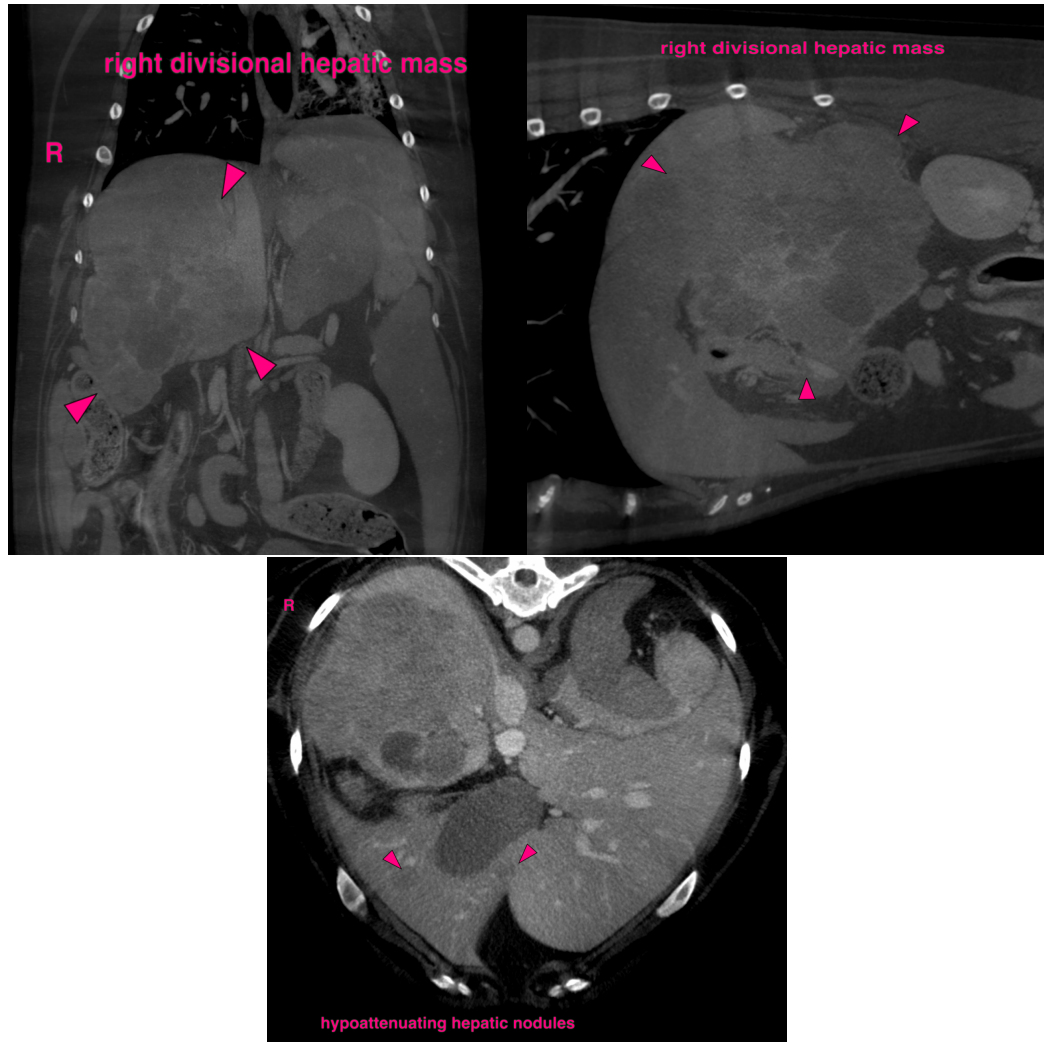
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The hypoattenuating hepatic lesions in the right medial & quadrate liver lobe can present nodular hyperplasia, hepatitis or metastatic disease.



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