



PATIENT

Luna Raffa

PRESENTING CLINICAL SIGNS

Presented for elevated pth, mildly elevated ionized calcium,
Abnormal PE/Chem/CBC/UA Results: Glucose 332mg/dl lcal 1.43 mmol/L

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

A high resolution pre- and post-contrast CT study of the skull and a post-contrast CT study of the thorax & abdomen are provided for review.

BREED

Husky

COMPUTED TOMOGRAPHIC FINDINGS

Skull

The tooth element 305 is absent.

SEX

FS

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

AGE

10

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. The external ear canals are within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

HOSPITAL NAME

Northeast Veterinary
Referral Hospital

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

In the cranial pole of the left thyroid gland, a well-defined post contrast mild hypoattenuating nodular lesion measuring 7 mm in diameter is visible.

REFERRING VET

Dr. Runde

Thorax

Multifocal mild spondylosis formation is seen along the thoracic spine. A lipoma is seen medial to the left latissimus dorsi muscle extending along the left laterodorsal thoracic wall, measuring approximately 7.1 x 2.2 x 6.2 cm in size.

INVOICE

48430

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.

DATE

11-17-21

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.

**PATIENT**

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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.

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Abdomen

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

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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.

SEX

FS

Nodular enlargement of both adrenal glands is noted, measuring 1.2 (L) and 1.8 (R) cm in diameter and presenting a mild heterogeneous contrast enhancement pattern.

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

AGE

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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.

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Sebastian Schaub, DVM
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The intervertebral discs L2/L3 to L4/L5 and L6/L7 - L7/S1 are mildly protruding into the vertebral canal, distorting the ventral epidural space at the same level.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intraparenchymal nodular lesion left thyroid gland
- Nodular enlargement adrenal glands bilaterally
- Intervertebral disc protrusion L2/L3 to L4/L5 & L6/L7 to L7/S1 with possible dynamic spinal cord compression
- Submuscular lipoma left thoracic wall
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

REFERRING VET

Dr. Runde

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**INVOICE**

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The nodule seen within the parenchyma of the left thyroid gland in combination with the laboratory findings is compatible with functional parathyroid adenoma or less likely carcinoma. Either ultrasound guided alcohol ablation or surgical excision are feasible treatment options.

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There is bilateral nodular enlargement of the adrenal glands, R>L, and potentials are (non)functional macronodular hyperplasia or neoplastic transformation (e.g. adenoma, adenocarcinoma, pheochromocytoma) recommend testing of the pituitary adrenal axis.



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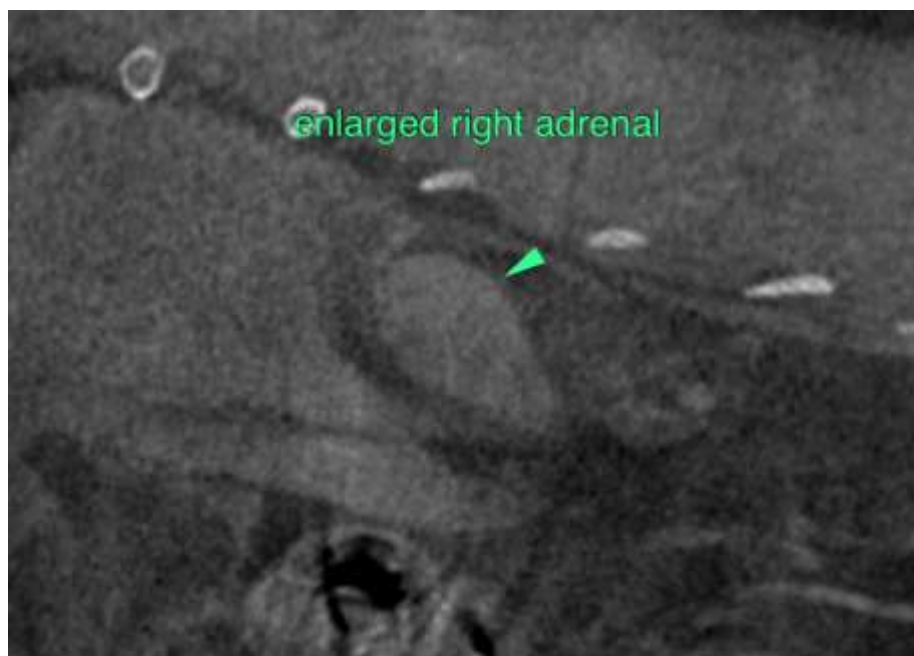
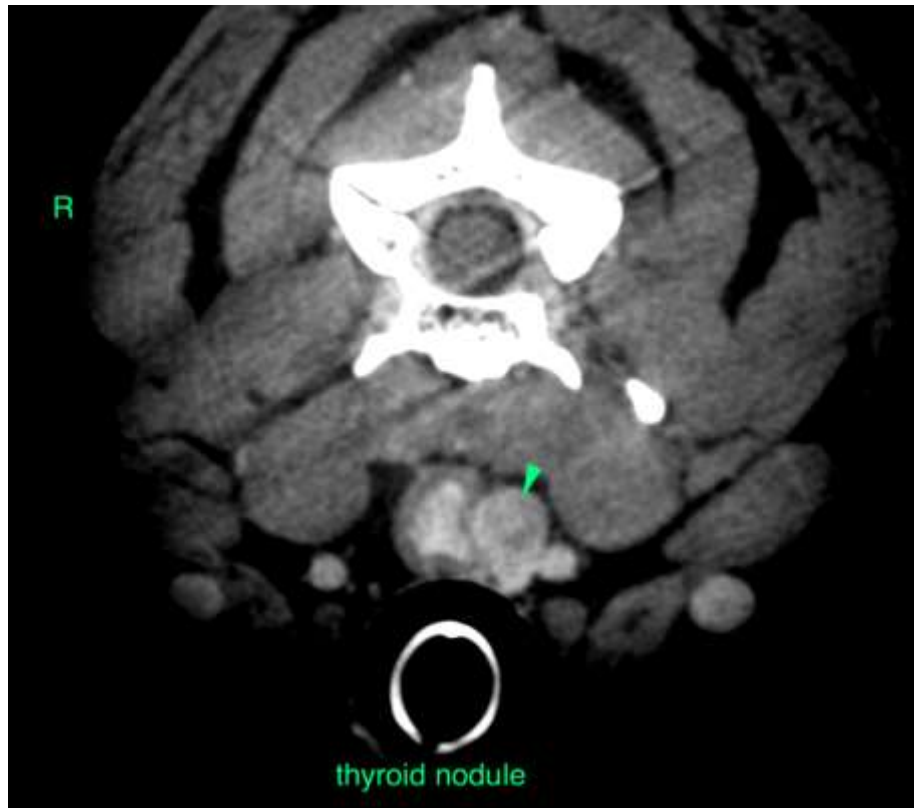
Dr. Runde

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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.

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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
sebast.schaub@gmail.com

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