
**PATIENT PRESENTING CLINICAL SIGNS**

Abraham Barber longstanding hx cruciate disease LH mass LH popliteal LN - histopathology dx aggressive malignancy CT for staging purposes

**SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE NECK, THORAX AND ABDOMEN**

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

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

Mastiff Neck  
 The left ventral arch of C1 and the base of the left ala of C1 present advanced aggressive osteolysis and immature periosteal new bone formation. Post contrast administration, a mild heterogeneous contrast enhancement pattern is seen level with the osteolytic region of C1.

**SEX** The remainder of the osseous and soft tissue structures of the neck are within normal limits.

Male Thorax  
 The bony and surrounding soft tissue structures are within normal limits.

**AGE** 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.

6 Years

The left atrium is prominent.

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

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.

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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. The hypogastric lymph nodes and the left inguinal lymph node are moderately enlarged and present a heterogeneous contrast enhancement pattern.

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.

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

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



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

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Multifocal osteophyte formation is seen along the facet joints of the lumbar spine. The vertebral endplates of the lumbosacral junction present moderate spondylosis formation. The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately 45% of the cross-sectional area of the vertebral canal at the same level.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**BREED**

Mastiff

- History of malignant soft tissue mass left hind limb
- Lymphadenopathy hypogastric lymph nodes and left inguinal lymph node
- Monostotic aggressive osteolytic lesion left ventral arch of C1
- Prominent left atrium
- Degenerative lumbosacral stenosis with spondylosis deformans
- Serial spondylarthrosis
- No evidence of pulmonary metastatic disease

**SEX**

Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

6 Years

The CT study is consistent with metastatic spread of the described malignant soft tissue mass at the left hind limb into the tributary hypogastric lymph nodes and the left inguinal lymph node. The aggressive bone lesion of C1 is highly suggestive of bone metastasis.

The prominent left atrium can be a sequela to mitral valve insufficiency – correlate with clinical signs (evidence of heart murmur).

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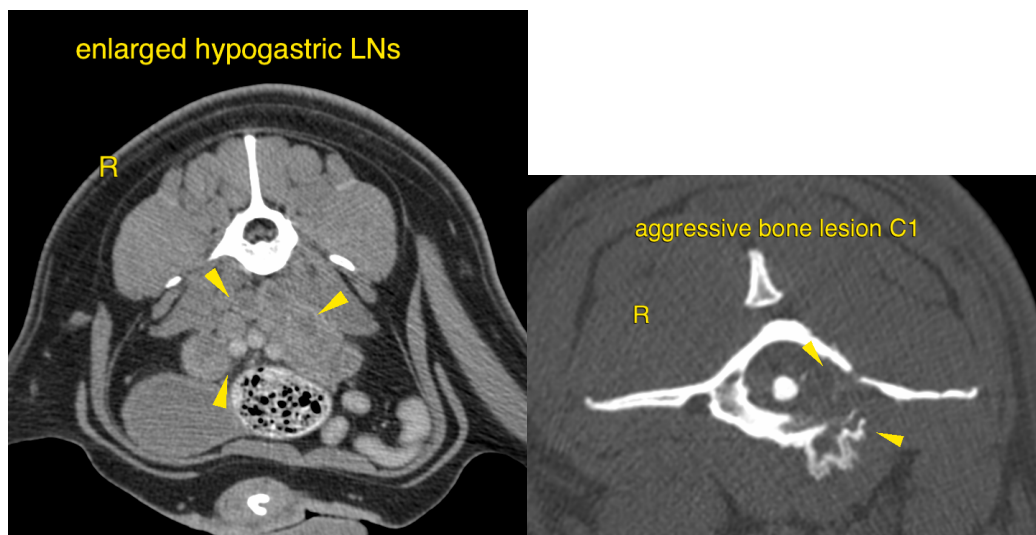
Dr. Eamon

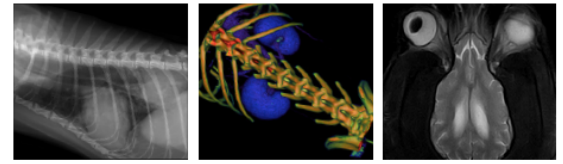
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**PATIENT**

Abraham Barber

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.

**SPECIES**

Canine

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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**BREED**

Mastiff

**SEX**

Male

**AGE**

6 Years

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