



PATIENT

Teddy Hoy

SPECIES

Canine

BREED

Cockerpool

SEX

Male

AGE

4

WEIGHT

7

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Olivia Jarvis

HOSPITAL NAME

Wirral Vets Upton

REFERRING VET

Animal Trust Ellesmere
Port

INVOICE

35596

DATE

11/21/25

PRESENTING CLINICAL SIGNS

History: Rectal mass that is bleeding.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

Multiple intervertebral discs along the thoracic spine present variable degree of central mineralization.

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.

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

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

The distal segment of the descending colon and the rectum present a semicircular intramural soft tissue mass with amorphous mineralization and loss of the wall layering; the wall is measuring up to 3.2 cm in width and has a heterogeneous contrast enhancement pattern.

The right renal lymph node and the colonic, internal iliac and sacral lymph nodes are significantly enlarged, rounded and have a mild irregular contrast enhancement pattern. The left common iliac vein being in contact with the enlarged internal iliac lymph node presents an intraluminal filling defect, occupying approximately up to 80% of the cross-sectional area of the vertebral canal at the same level.



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The bony and surrounding soft tissue structures reveal no abnormalities.

Teddy Hoy

COMPUTED TOMOGRAPHIC DIAGNOSIS

SPECIES

- Intramural mass distal segment of descending colon & rectum with dystrophic mineralization
- Lymphadenopathy right renal lymph node, colonic lymph node and multiple hypogastric lymph nodes
- Normal thorax, no evidence of pulmonary metastatic disease

Canine

BREED

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cockerpoo

The findings are consistent with primary intramural rectal/colonic soft tissue neoplasia with metastatic spread to the regional lymph nodes – the top differentials include lymphoma, histiocytic sarcoma, adenocarcinoma. FNA sampling/biopsy of the rectal mass and lymph nodes can be performed for specification.

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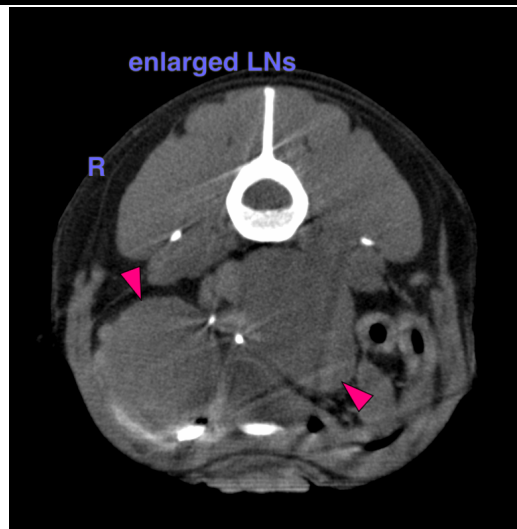
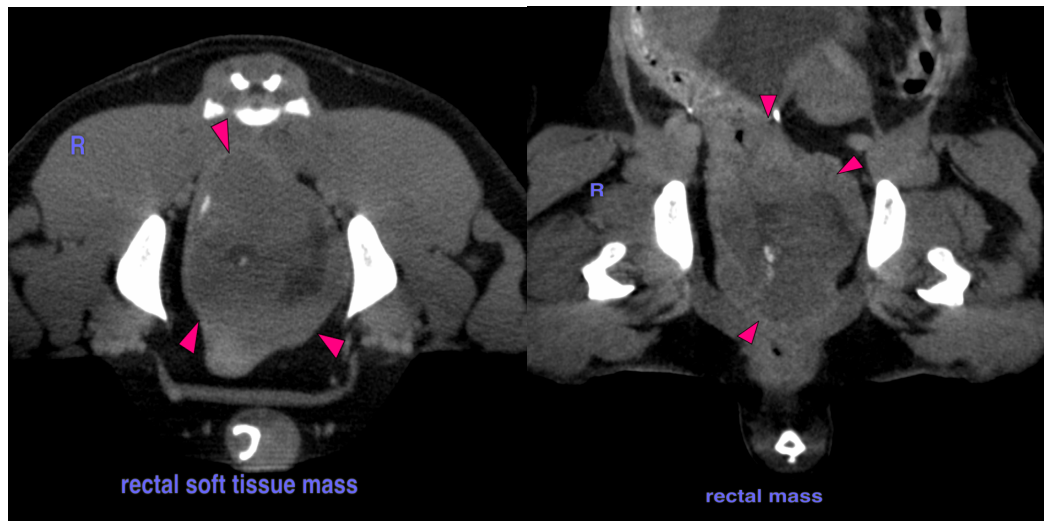
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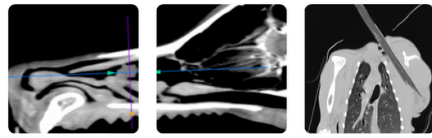
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The information and recommendations provided are based on the images presented by the



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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