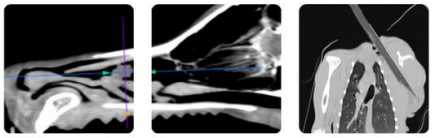

PATIENT

Tye Kidd

SPECIES

Canine

BREED

Dachshund

SEX

NM

AGE

15Y

WEIGHT

3.93kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

72468

DATE

11-3-25

PRESENTING CLINICAL SIGNS

Pet has been lethargic and they went to the ER last night. Pet has an Abdominal Mass after X rays. Surgical planning

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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

In the pleural cavity, a moderate amount of gravity dependent, fluid attenuating material is visible. The lung lobes are retracted from the thoracic wall by the fluid attenuating material and present a generalized decreased volume. The lung parenchyma presents the expected architecture and attenuation behavior.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform.

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.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

A separate right & left caudal vena cava of the pre-renal segment is seen.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration both kidneys present well-defined, roundish parenchymal filling defects.

The adrenal glands are within normal limits for size, shape and organ architecture.

The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

Originating from the cranial extremity of the spleen, a globoid, heterogeneous fat and soft tissue attenuating mass with a corresponding irregular contrast enhancement pattern is seen; measuring 5.5 cm in diameter. The caudal extremity of the spleen presents mild irregular margins and a post contrast well-defined hypoattenuating parenchymal area.

The peritoneal fat in the cranial abdomen presents generalized mild soft tissue striation.

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.

The bony and surrounding soft tissue structures reveal no abnormalities.

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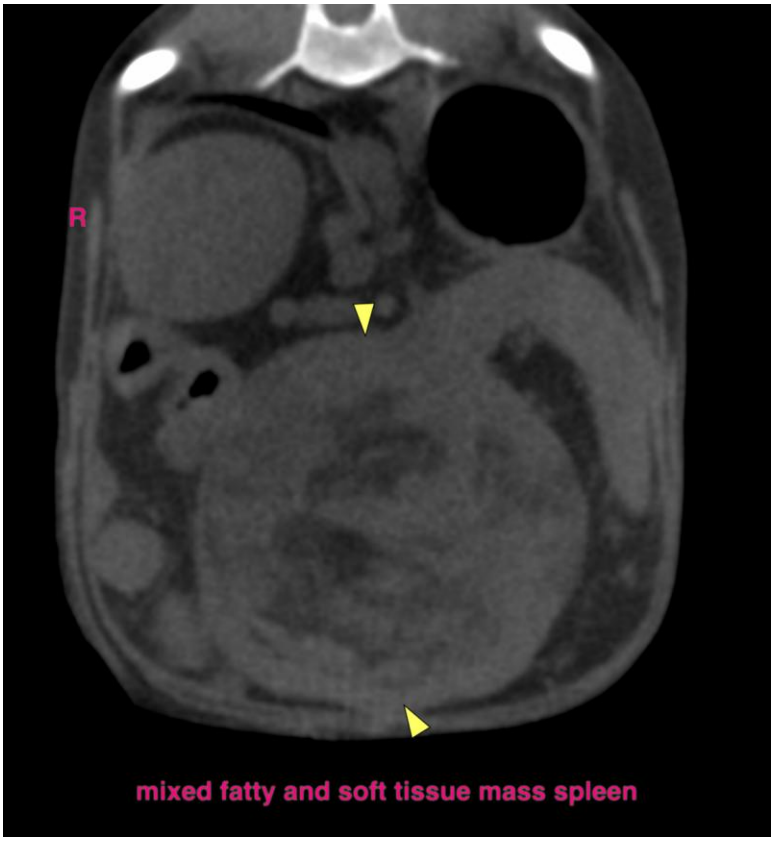
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large splenic soft tissue mass with fatty and soft tissue component
- Mild peritoneal effusion
- Pleural effusion
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic soft tissue mass is highly suggestive for large splenic myelolipoma or less likely liposarcoma – the mild peritoneal effusion can be indicative for hemorrhage of the splenic mass. Splenectomy is the therapy of choice.

An underlying cause for the pleural effusion cannot be specified and may be secondary to the abdominal pathology or present a second entity – if not done so yet, tapping the pleural effusion along with complete fluid analysis is advised.



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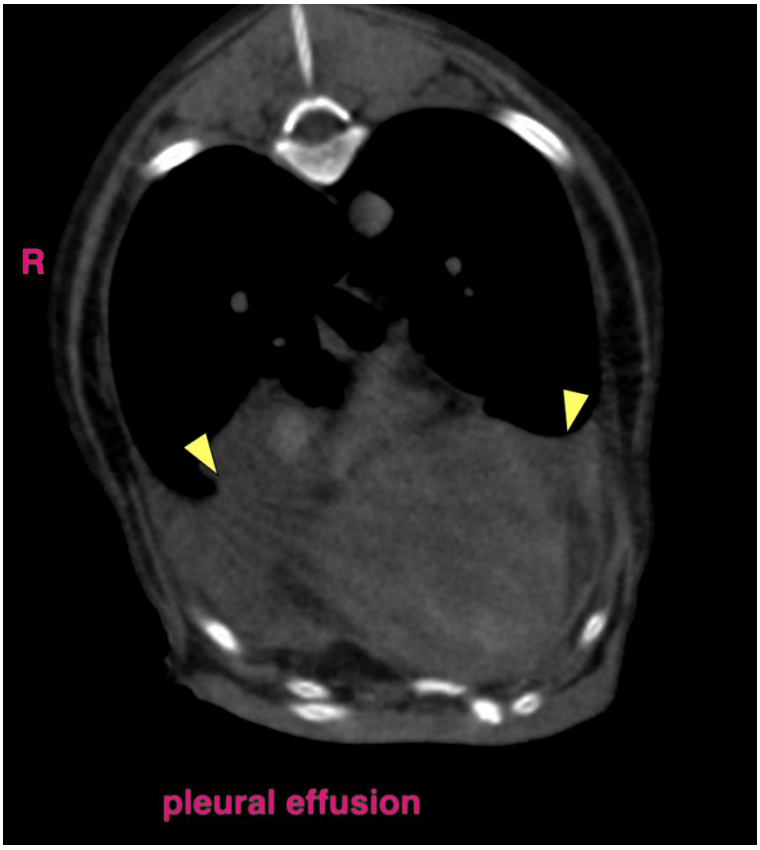

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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