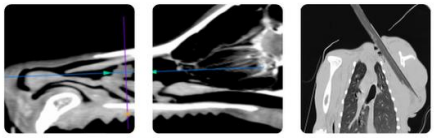

PATIENT

Sadie Geigle

SPECIES

Canine

BREED

Labrador Retriever

SEX

FS

AGE

8

WEIGHT

33.3

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Dr. Runde

HOSPITAL NAME

Northeast Veterinary Referral Hospital

REFERRING VET

Dr. Runde

INVOICE

72527

DATE

11-5-25

PRESENTING CLINICAL SIGNS

Presented for a chronic limp on the left front leg. No obvious orthopedic abnormalities on physical examination. Mass (feels like a lipoma) noted in left shoulder region. Obtained a biopsies of the mass. No other issues reported by the owner.
Abnormal PE/Chem/CBC/UA Results: normal

COMPUTED TOMOGRAPHY OF THE THORAX, ABDOMEN AND SHOULDER JOINTS

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax & Shoulder joints

Multiple lipomas are seen along the thoracic wall.

Both shoulder joints present smooth margins of the periarticular bones and the surrounding soft tissue structures are within normal limits.

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. Caudal to the kidneys, metal attenuating surgical clips are seen.

Both adrenal glands are prominent, measuring up to 10 mm in diameter.

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

In the body of the spleen, a uniform soft tissue attenuating nodule is mildly bulging beyond the splenic margins; measuring 2.2 cm in diameter.

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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The bony and surrounding soft tissue structures reveal no abnormalities.

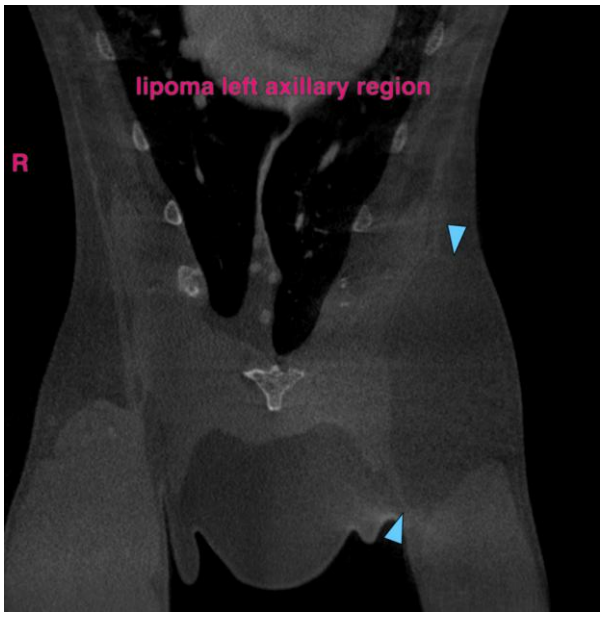
COMPUTED TOMOGRAPHIC DIAGNOSIS

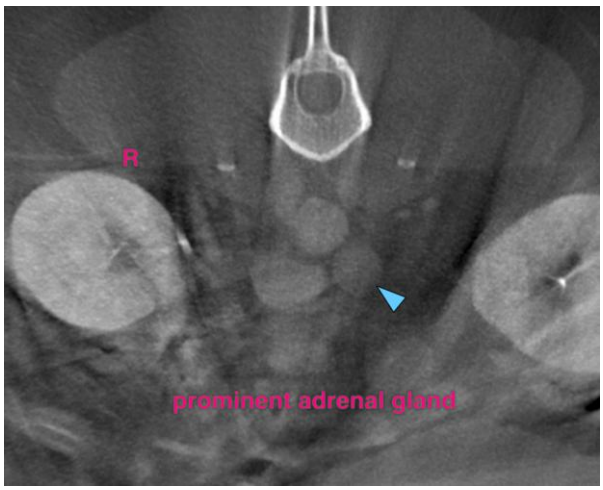
- Nodular enlargement adrenal glands bilaterally
- Multiple lipomas along the thoracic wall and axillary region
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The nodular enlargement of the adrenal glands can be a sequela to (non)functional adrenal hyperplasia or less likely early stage of neoplastic transformation (e.g. adenoma, adenocarcinoma).

No abnormalities can be specified, that do explain the left front limb lameness – the right elbow joint presents signs of elbow dysplasia and secondary degenerative joint disease.





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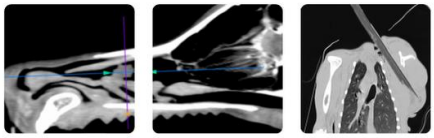

Teleradiology
Educational Teleconsultation Services™

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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