



PATIENT

Jeter Bensinger

PRESENTING CLINICAL SIGNS

Referral Patient: NWB lame on right hind leg, was splinted for possible fracture of tarsus and splint was on for 5 weeks resulting in severe bandage disease, chronically licking at tarsus
 Abnormal PE/Chem/CBC/UA Results: non ambulatory RH, contracted quadriceps, moderate to severe swelling around the hock and distal foot, concern for cancer

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE THORAX, ABDOMEN AND HIND LIMBS

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

BREED

Pomeranian

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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

SEX

Two cranial mediastinal lymph nodes are prominent.

Male Neutered

The cardiovascular structures including the pulmonary vasculature are within normal limits.

AGE

13 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

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 & Hind limbs

HOSPITAL NAME

Catskill Veterinary Services, PLLC

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.

REFERRING VET

Dr. Joseph D'Abbraccio

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

The gallbladder is significantly distended and contains mineralizing material, post contrast administration the gallbladder appears to be compartmented.

INVOICE

55705

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.

DATE

12-19-22

At the plantar aspect of the right tarsal joint and metatarsal region, an ill-defined, homogeneous soft tissue attenuating and heterogeneous contrast enhancing mass is appreciated, measuring 4.6 x 4.7 x 9.6 cm in size. The partially encompassing the right tarsal joint and metatarsal bones and



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extending distally up to the proximal aspect of the main pad. The right calcaneus presents moth eaten osteolytic lesions.

The right popliteal, the right inguinal and the right medial iliac lymph node are moderately enlarged and rounded.

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Canine

The volume of the musculature of the right hind limb is generalized moderately decreased.

The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately 40% of the cross-sectional area of the vertebral canal at the same level. The vertebral endplates L7/S1 present spondylosis formation.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass plantar aspect right tarsal/metatarsal region with aggressive osteolytic lesion right calcaneus
- Lymphadenopathy of the tributary lymph nodes
- Disuse atrophy musculature right hind limb
- Suspect gallbladder mucocele
- Intervertebral disc protrusion L7/S1 with potential dynamic compression of the cauda equina fibers
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass at the right tarsal joint/metatarsal region is supporting the diagnosis of underlying soft tissue neoplasia with secondary osteolytic lesions of the right calcaneus – such as sarcoma, mast-cell tumor, other. The odds for metastatic spread to the tributary lymph nodes are high and FNA sampling can be used to rule in/out metastatic spread.

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The changes of the gallbladder are highly concerning for mucocele, and cholecystectomy appears indicated.

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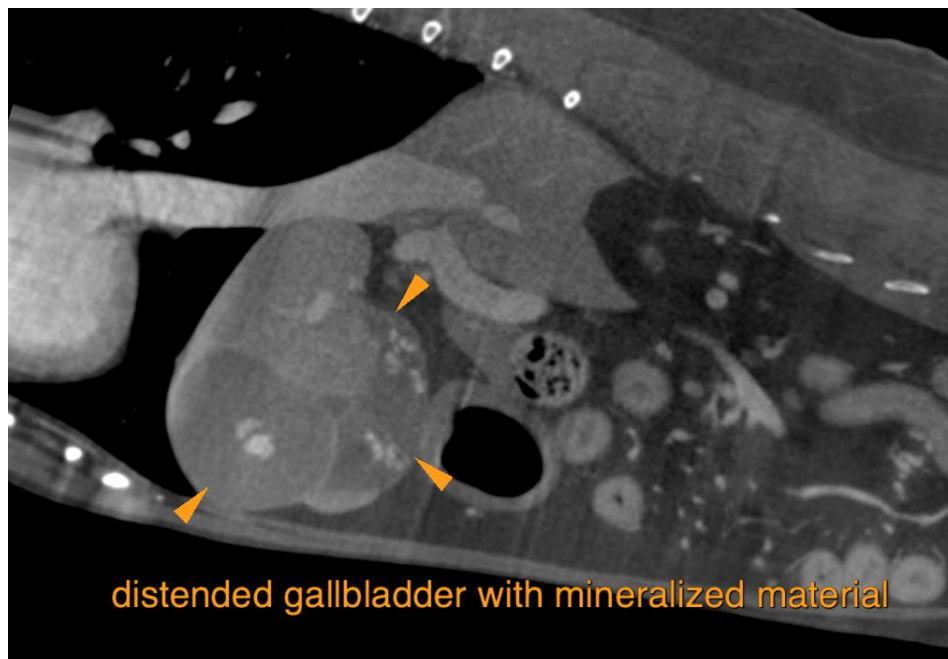
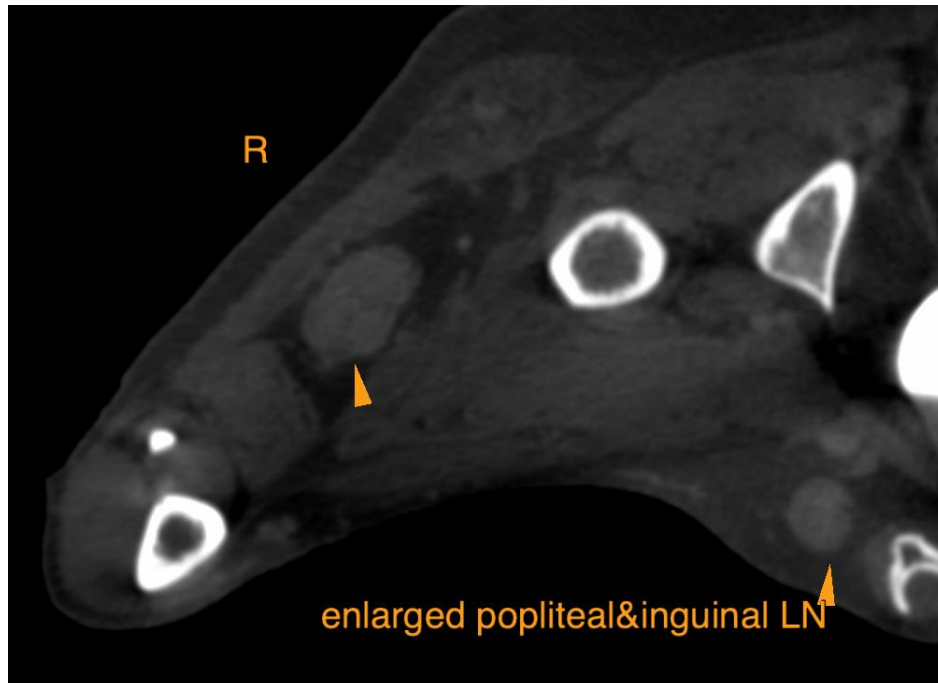
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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