



## PATIENT

Perla Ramos

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

F

## AGE

11Y

## WEIGHT

91.4lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

José L. Alvarado Bruno  
- CT Scan Technician  
(CVT)

## HOSPITAL NAME

Veterinary Image  
Center

## REFERRING VET

Dr. M. Quiñones,  
DVM, DACVS

## INVOICE

72851

## DATE

12-3-25

## PRESENTING CLINICAL SIGNS

The patient was referred for an abdominal and thoracic CT scan for surgical planning of the mammary gland tumor removal.

Abnormal PE/Chem/CBC/UA Results: CBC --- NEU mild increased (11.25) CHEM --- ALT mild increased (166), ALKP increased (1278), GLU severe decreased (25), K+ mild decreased (3.5) TT4 --- normal (1.7) UA --- USG: 1.013, WBC high (21-50)

## COMPUTED TOMOGRAPHY 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

The body condition score is 8-9/9.

### Thorax

Along the thoracic spine, multifocal mild spondylosis formation is seen. The sternum presents moderate degenerative changes.

The periarticular bones of both shoulder joints present mild osteophyte new bone formation.

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 right subclavian artery is originating from the aortic arch as a separate vessel and is coursing dorsally of the esophagus and trachea.

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, but zones with dystelectasis of the left lung.

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 irregular margins with concave depression of the renal surface. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

Both ovaries present well-defined, cavitory lesions, measuring up to 12 mm in diameter. The uterus is small, unremarkable.

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 portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.



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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.

Along the lumbar spine, multifocal spondylosis formation is seen. A vacuum phenomenon is seen in the intervertebral disc space L7/S1.

In the right mammary complex #5, a uniform soft tissue attenuating and post contrast multicameral soft tissue mass is seen; measuring 6.2 x 2.4 x 7.6 cm.

In the left mammary complex #4 and #5, multiple soft tissue attenuating nodules with a mild irregular contrast enhancement pattern are seen; measuring up to 9 mm in diameter.

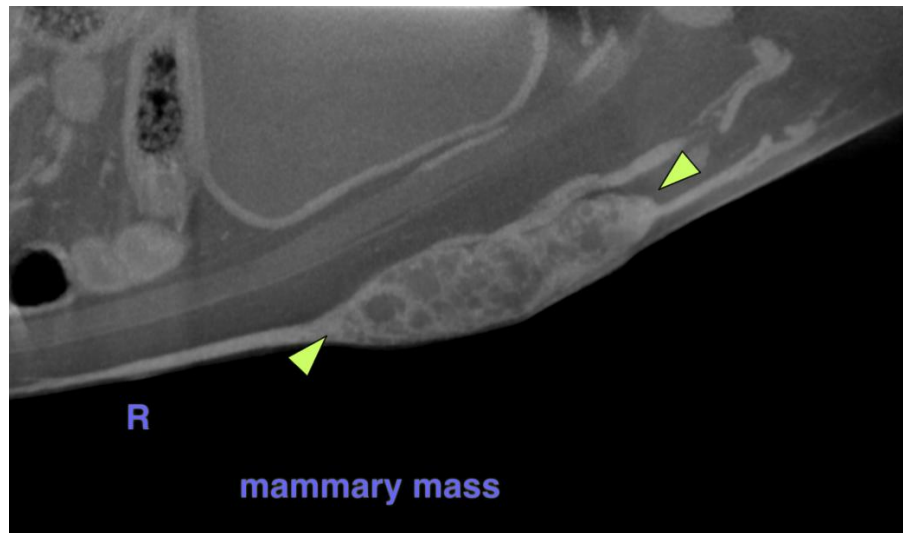
Both coxofemoral joints present mild to moderate osteophyte new bone formation, R>L. The acetabular groove bilaterally is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Obesity
- Mammary mass right mammary complex #5 and nodules left mammary complexes #4 and #5
- Ovarian cysts
- Chronic discopathy lumbosacral junction
- Multiple chronic renal infarcts
- No evidence of pulmonary metastatic disease

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT is fitting the history of mammary tumor involving multiple mammary complexes – both benign cystic mammary tumor (prioritized) as well as carcinoma are potentials. Complete surgical resection of the mammary masses is considered feasible.





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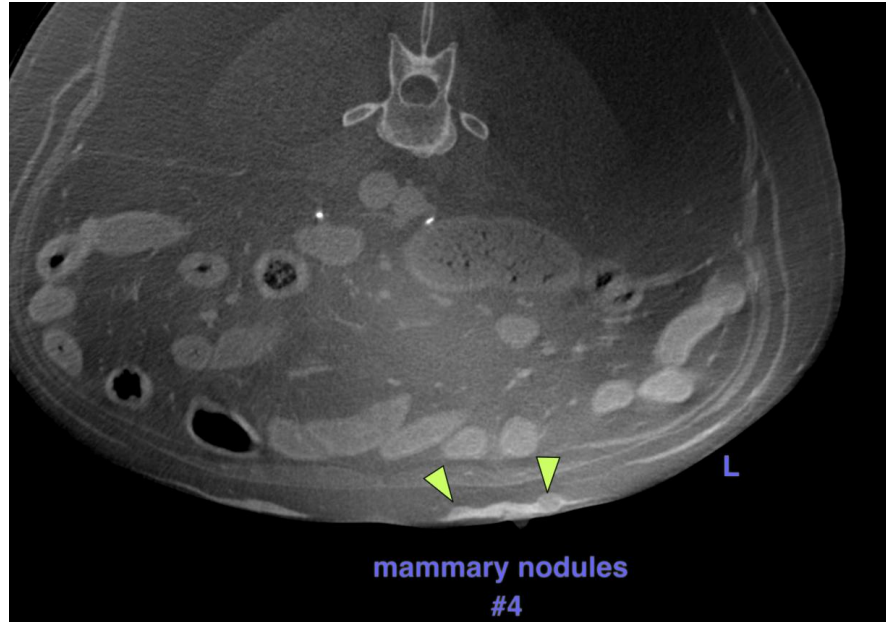
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)