

PATIENT

Vicky Rodriguez

SPECIES

Canine

BREED

Labrador Retriever

SEX

SF

AGE

4Y

WEIGHT

73.2lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

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

HOSPITAL NAME

Veterinary Image
Center

REFERRING VET

Dr. F. Ortiz-Vidal,
DVM

INVOICE

72882

DATE

12-8-25

PRESENTING CLINICAL SIGNS

The patient presents with a history of weight loss and anorexia. On 12/5/2025, the patient was evaluated for vomiting with blood. Since that visit, the patient has not shown improvement. During the CT scan, the patient began to have spontaneous epistaxis. Rule out Adisson's and CT scan base line is low less than 0.5 I prefer to do the CT scan anyways and wait for the report then no ACTH stim test. Abnormal PE/Chem/CBC/UA Results: 12/5/2025 CBC --- WBC increased (26.82), NEU increased (14.2), MONO increased (1.52), EOS increased (6.08) CHEM --- GLU decreased (67), TP decreased (4.6), ALB decreased (1.3) 12./8/2025 CBC --- RBC decreased (4.5), HCT decreased (30.3%), HGB decreased (11.1), WBC increased (19.95), EOS increased (5.4), BASO increased (0.15)

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Triadan 209 is absent. The mandibular premolar teeth are oriented in a buccal direction.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Post contrast administration, the muscles attaching to the caudal surface of the occipital bone present diffuse contrast enhancing.

Thorax

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

The sternal lymph nodes are prominent.

A prominent thymic remnant is appreciated in the cranioventral aspect of the mediastinum

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.



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Abdomen

The peritoneal fat presents a generalized mild soft tissue striation.

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.

Mild generalized thickening of the gallbladder wall is appreciated.

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

The gastric wall is diffusely thickened, measuring up to 2.0 cm in width and the gastric rugal folds have a more plump conformation. Post contrast administration, the wall layering of the gastric wall is maintained, but appears mildly more heterogeneous. The gastric and lienal lymph node is moderately enlarged and rounded.

The hypogastric lymph nodes are prominent.

The subcutaneous fat along the abdominal wall presents generalized mild to moderate soft tissue striation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Generalized moderate thickening of the gastric wall
- Lymphadenopathy sternal, gastric, lienal and hypogastric lymph nodes
- Mild thickened gallbladder wall – likely secondary to the pathology of the stomach and regional lymph nodes
- Very mild peritonitis
- Malorientation mandibular premolar teeth
- Absent triadan 209
- Normal thorax, no evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The generalized thickening of the gastric wall along with the lymphadenopathy is highly concerning for neoplastic infiltration such as round cell tumor or adenocarcinoma. A differential is marked gastritis with accompanying lymphadenopathy, but I consider the odds lower. Recommend ultrasound guided FNA sampling of the enlarged lymph nodes ± gastric wall. Gastroscopy including gastric biopsy can be used as advanced diagnostic tool as well.



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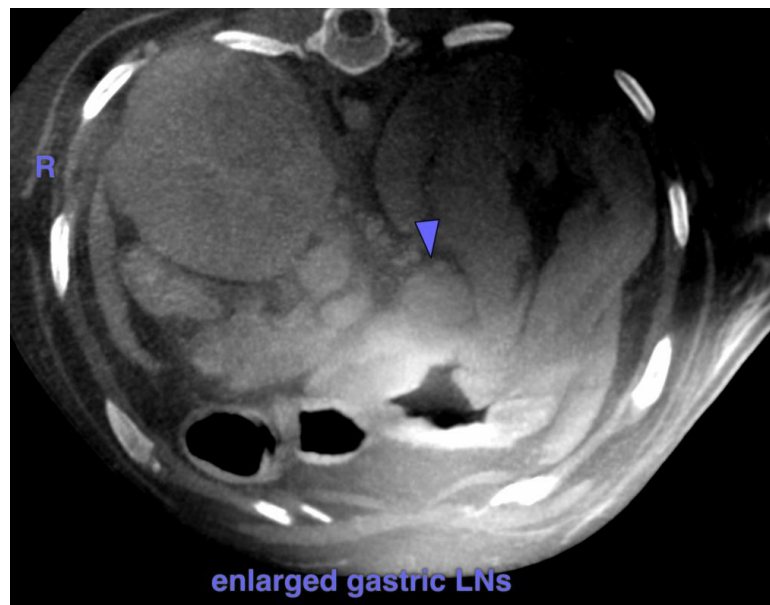
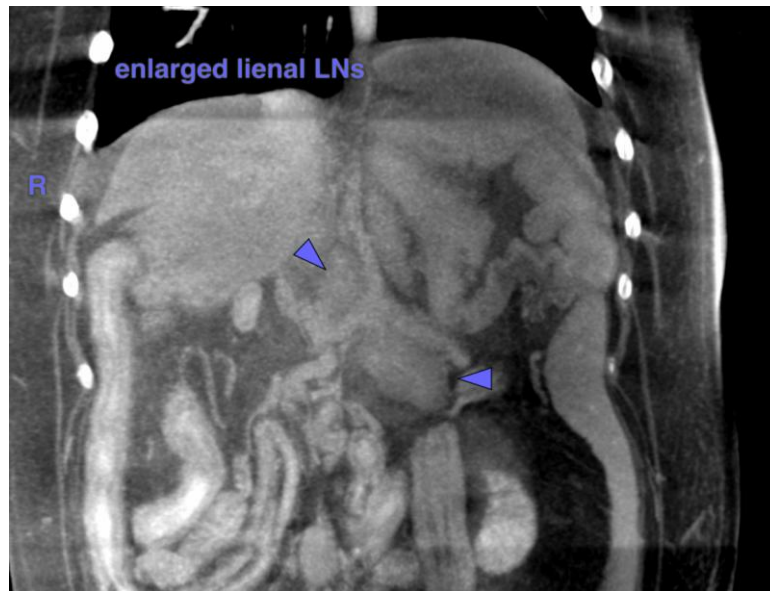
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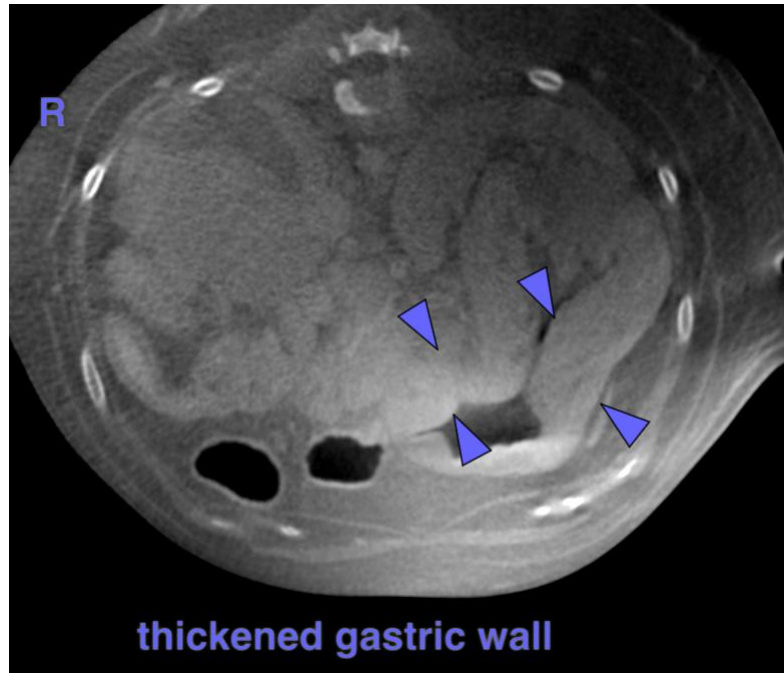
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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