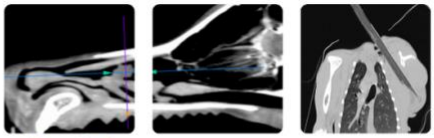

PATIENT

Rhi Paull

SPECIES

Canine

BREED

Greyhound

SEX

Spayed Female

AGE

6

WEIGHT

29

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Dr. Henry Xue

HOSPITAL NAME

Belconnen Veterinary Centre

REFERRING VET

Dr. Henry Xue

INVOICE

13784

DATE

2/12/26

PRESENTING CLINICAL SIGNS

- firm left chest mass.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen in a lung and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

Centered on the costochondral junction of the left 7th rib, a roundish, expansile soft tissue attenuating mass with amorphous mineralization emanating from the respective rib is appreciated. The affected intercostal spaces are diverging. The costal mass of the 7th left rib is protruding into the pleural cavity and the lung at the same level is distorted by the extra pleural mass effect.

The left sternal lymph node is prominent.

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.

Throughout the lung parenchyma, sporadic well-defined, soft tissue attenuating nodules are appreciated.

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.

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 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.

Multiple intervertebral discs present variable degree of central mineralization.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteoproliferative lesion with associated soft tissue mass cartilage 7th left rib
- Structured nodular interstitial lung pattern
- Lymphadenopathy left sternal lymph node

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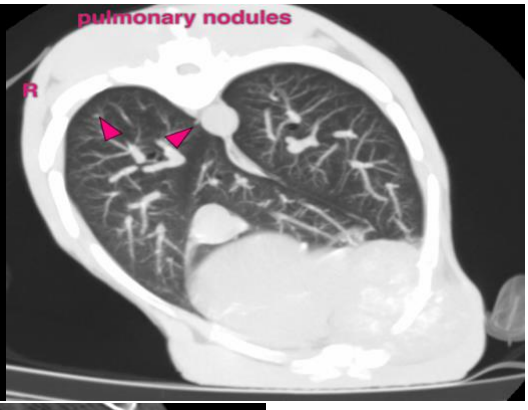
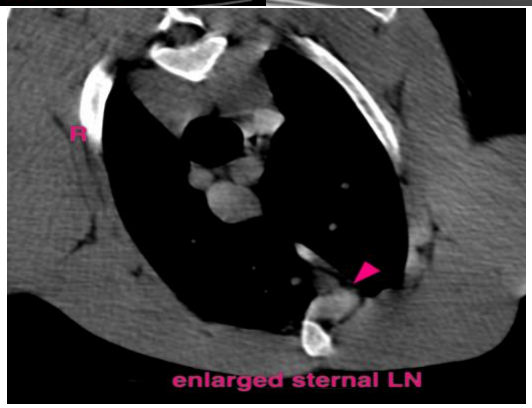
- Multifocal chondroid disc degeneration along the lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated firm mass is caused by a primary costal tumor – such as chondrosarcoma, hemangiosarcoma, round cell tumor, other. Biopsy may be used as advanced diagnostic tool. The pulmonary nodules are indicative for pulmonary metastatic spread.

The odds for metastatic spread to a sternal lymph node are increased.





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