



**PATIENT PRESENTING CLINICAL SIGNS**

Mia Gulina soft tissue sarcoma R hock- preparing to remove surgically. History of mild elevation ALP historically - pre op bloodwork early Feb shows progression in ALP and new increase in ALT as well. Patient asymptomatic.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: ALP: 1020U/L ALT: 208U/L

Canine **COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

**BREED** A high resolution pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

Boxer **COMPUTED TOMOGRAPHIC FINDINGS**

Thorax

**SEX** Multifocal moderate spondylosis formation is seen along the thoracic spine.

FS 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.

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

11 Years **INTERPRETED BY** 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.

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The lung parenchyma presents the expected architecture and attenuation behavior with interspersed punctuate mineralization.

**HOSPITAL NAME** Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

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Abdomen

**REFERRING VET** The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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Both kidneys present a moderately decreased volume with irregular margins. Protruding from the lateral surface of the left kidney, a well-defined, pre- and post- contrast hypoattenuating (5 HU) spherical structure is visible, measuring 5 cm in diameter. A mild amount of mineral attenuating material is associated with the renal pelvis bilaterally.

**INVOICE** 50296 The adrenal glands are within normal limits for size, shape and organ architecture.

**DATE** 2-15-22 The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

At the caudoventral aspect of the left lateral liver lobe, a mild heterogeneous soft tissue attenuating, and heterogeneous moderate contrast enhancing - more pronounced in the early



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contrast phase – , irregular marginated mass is visible, measuring approximately 6.3 x 5.4 x 5.5 cm in size. In the craniodorsal aspect of the left lateral liver lobe a second ovoid shaped moderate heterogeneous contrast enhancing parenchymal lesion is visible, as well as in the quadrate liver lobe, measuring up to 2.6 cm in size. Multifocal throughout the hepatic parenchyma, small pre- and post- contrast hypoattenuating lesions, measuring up to 3 mm in size are noted.

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

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The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.  
The hypogastric lymph nodes are small, unremarkable.

**SEX**

FS

Generalized bridging spondylosis formation is seen along the lumbar spine. The intervertebral disc L1/L2 is mildly protruding into the vertebral canal and the lumbosacral intervertebral disc is moderately protruding into the vertebral canal.

The coxofemoral joints present moderate osteophyte new bone formation.

**AGE**

11 Years

In the subcutaneous tissue at the dorsal aspect of the right tarsal joint, a well-defined, ovoid shaped, soft tissue attenuating and homogeneous contrast enhancing mass, measuring 3.5 x 2.7 x 2.8 cm in size is visible.

The periarticular bones of the right tarsal joint present moderate to marked osteophyte new bone formation and a moderate periarticular swelling with a thickened joint capsule.

**INTERPRETED BY**

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Multiple hepatic parenchymal mass lesions
- Subcutaneous soft tissue mass dorsal aspect right tarsal joint
- Advanced chronic nephropathy bilaterally with a large left sided renal cyst
- Multiple hepatic cysts
- Degenerative lumbosacral stenosis with likely dynamic compression of the cauda equina fibers
- Advanced degenerative osteoarthritis right tarsal joint with synovialitis and synovial osteochondromatosis
- Degenerative osteoarthritis coxofemoral joints bilaterally
- Pulmonary osteomas
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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The findings are consistent with the history of subcutaneous sarcoma at the dorsal aspect of the right hock, the mass is well-defined, and complete surgical resection appears feasible. The regional lymph nodes present without signs of metastatic spread.

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Given the cystic lesions within the hepatic masses, the odds for primary hepatic neoplasia such as hepatocellular carcinoma are high, other potentials include hepatic adenoma, sarcoma or metastatic disease. FNA sampling ± hepatic biopsy can be used as advanced diagnostic tests. Surgical resection of the larger mass in the caudoventral aspect of the left lateral liver lobe and the mass in the quadrate lobe appear feasible. Lobectomy of the entire lateral lobe will allow removal



**PATIENT** of the intraparenchymal lesion as well.

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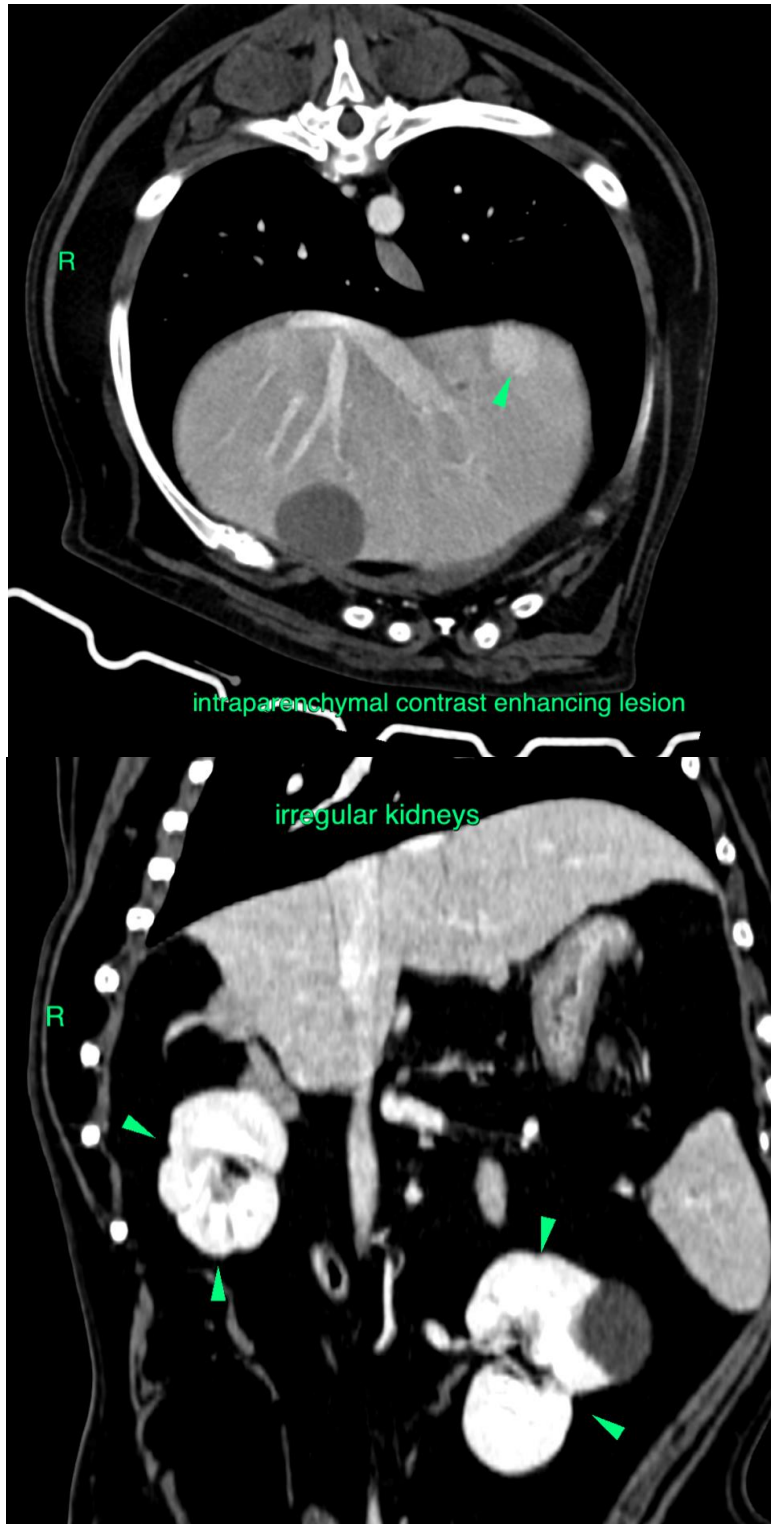
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

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.

**BREED**

Boxer

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**SEX**

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