SonoPath Teleradiology
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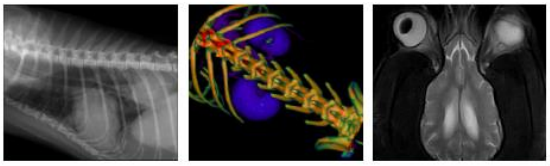

PATIENT

Taty Osegueda

SPECIES

Canine

BREED

Dachshund

SEX

Female/sp

AGE

13 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

New Bridge
Veterinary Practice

REFERRING VET

Dr. Abina Glennon

INVOICE

50332

DATE

2-16-22

PRESENTING CLINICAL SIGNS

Vomiting, lethargic, anorexic, rule out caudal abdominal mass

RADIOGRAPHIC STUDY OF THE ABDOMEN

Radiographs of the abdomen in two orthogonal imaging planes are provided for review.

RADIOGRAPHIC FINDINGS

Multifocal mild spondylosis formation is seen along the lumbar spine. The vertebral bodies of L4/L5 are fused.

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The hepatic volume is moderately increased, and the liver is protruding caudally beyond the costal arch.

The splenic head is in the anticipated position and within normal limits for size and opacity. In the left caudal abdomen – region of the caudal extremity of the spleen – a well-defined, spherical, homogeneous soft tissue opaque mass, measuring 5.1 cm in diameter is visible.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

The colon is seen in the expected position and presents with appropriate content.

RADIOGRAPHIC DIAGNOSIS

- Soft tissue mass left caudal abdomen
- Block vertebra L4/L5
- Spondylosis deformans

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left caudal abdominal mass is seen adjacent to the caudal extremity of the spleen and the odds for splenic mass are high -such as nodular hyperplasia, hematoma or neoplasia (e.g. hemangiosarcoma, round cell tumor, other). Other potentials include cyst, neoplasia, granuloma originating from the peritoneum, lymph node, uterine stump, intestinal tract. Ultrasound might be used as advanced diagnostic imaging modality. Splenectomy would be the therapy of choice if splenic origin is confirmed. It is unclear if the mass is the cause for the acute presenting clinical signs, there is no evidence of free peritoneal fluid.

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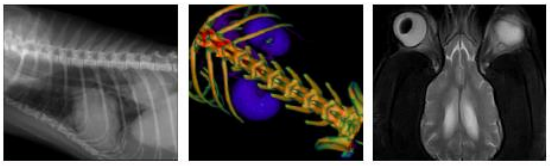

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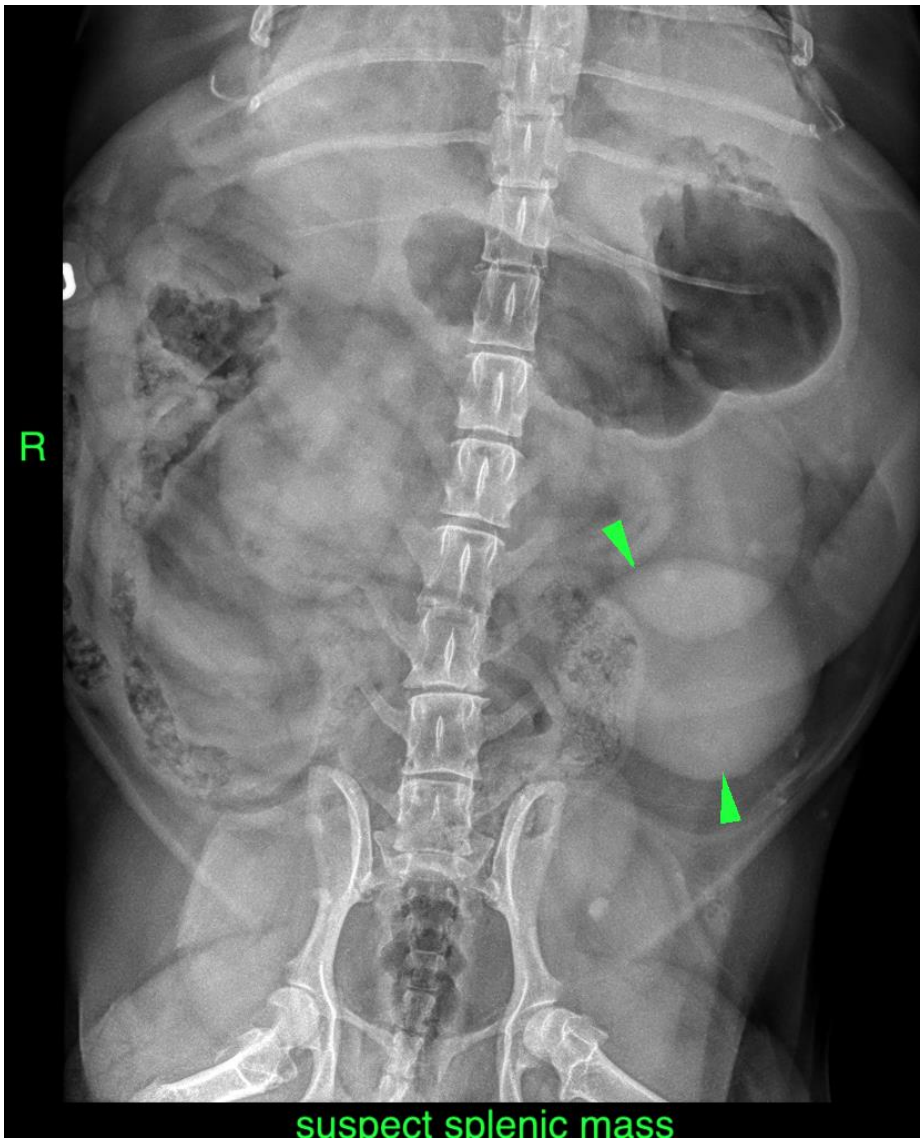
Potentials for the hepatomegaly include metabolic hepatic disease/steroid induced hepatopathy, hepatitis or neoplastic infiltration. Ultrasound including FNA sampling can be used as minimally advanced diagnostic tests.



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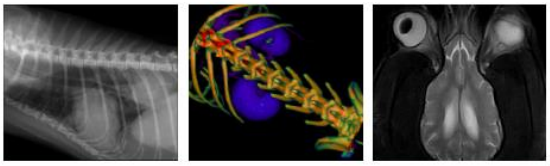

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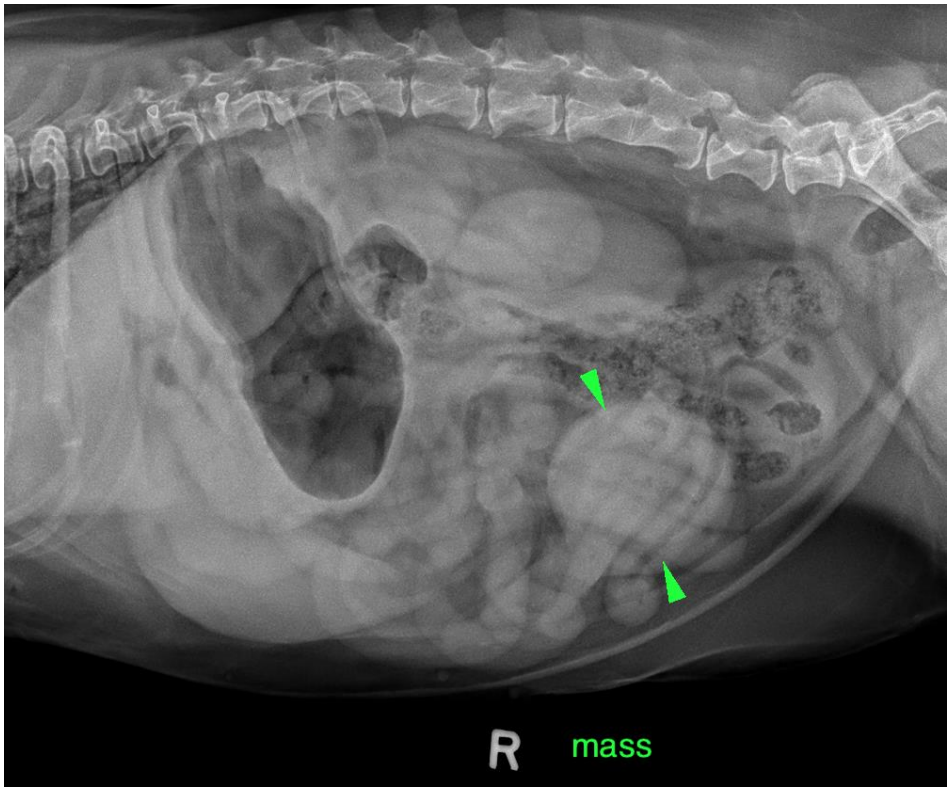

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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