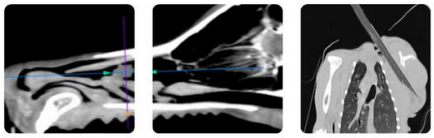

PATIENT

Luci Odonnell

SPECIES

Canine

BREED

Pitbull

SEX

FS

AGE

6

WEIGHT

30.8

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center - Oceanside

REFERRING VET

Kam

INVOICE

73881

DATE

2-19-26

PRESENTING CLINICAL SIGNS

- 15x20 cm firm red warm to touch mass on right caudal mammary gland 3-5 was palpated
- hind limb weakness, thickened both stifle joints.

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

Thorax

Along the thoracic & lumbar spine, multifocal spondylosis formation is seen.

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 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.

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.

The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The cranial extremity of the spleen presents focal convex shaped bulging of the splenic capsule.

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.

The medial iliac and inguinal lymph nodes are moderately enlarged, rounded, uniform soft tissue attenuating and contrast enhancing. The aortic lymph nodes are prominent.

Level with the right caudal mammary complexes, an ill-defined, uniform soft tissue attenuating and uniform contrast enhancing swelling is seen, measuring approximately 10.3 x 5.3 x 19.7 cm. The surrounding fat presents moderate soft tissue striation.

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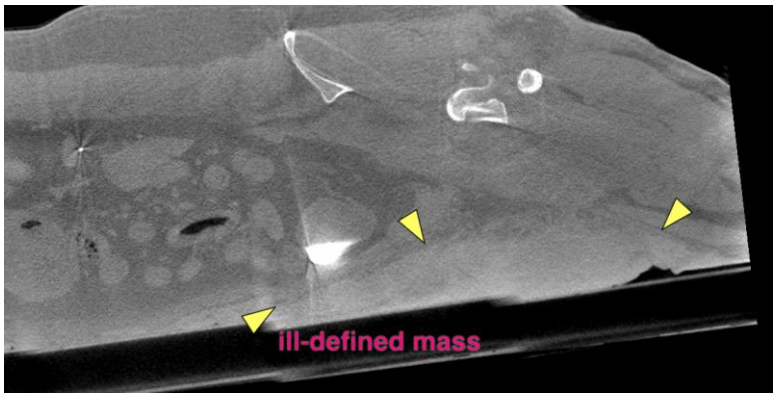
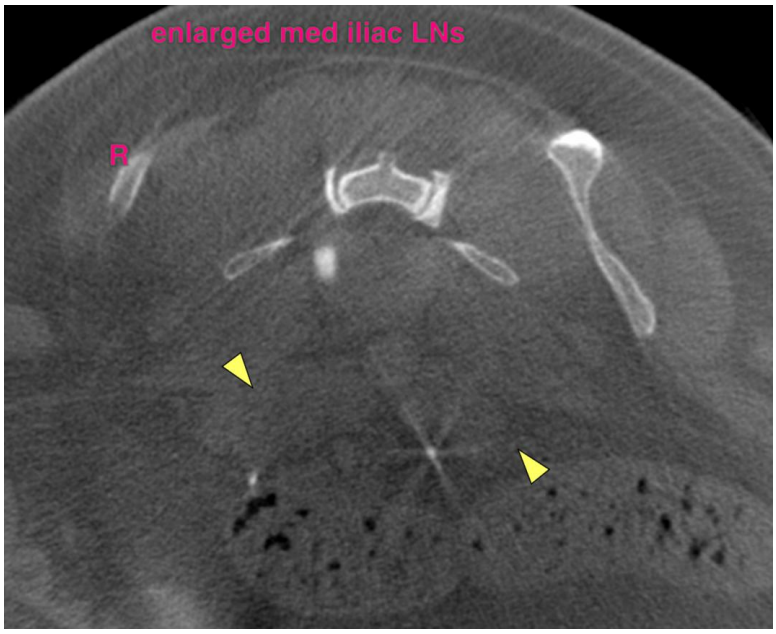
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Ill-defined soft tissue mass right caudal abdominal wall with surrounding cellulitis
- Lymphadenopathy inguinal, medial iliac and aortic lymph nodes
- Intraparenchymal splenic nodular lesion
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The soft tissue mass along the right caudal abdominal wall is highly concerning for soft tissue neoplasia – either mast cell tumor, sarcoma or mammary neoplasm (e.g. carcinoma). The odds for metastatic spread to the regional lymph nodes are high. FNA sampling of the mass and regional lymph nodes can be performed for specification.





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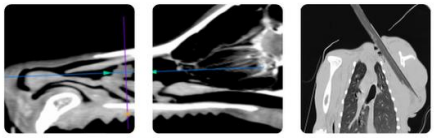

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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