

PATIENT

Chase Kilner

SPECIES

Canine

BREED

Staffy

SEX

Neutered Male

AGE

12

WEIGHT

33

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen VC

REFERRING VET

Dr. Eamon

INVOICE

35936

DATE

2/22/26

PRESENTING CLINICAL SIGNS

History: Marked abdominal effusion

Abnormal PE/Chem/CBC/UA Results: cbc/chem/t4 pending

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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

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, but zones with dystelectasis of the ventral aspects of the lung.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

The diaphragm is in a relative cranial position.

Abdomen

The abdominal volume is increased.

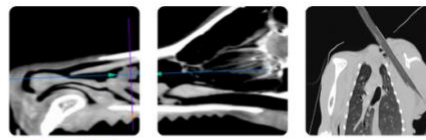
In the peritoneal cavity a significant amount of fluid attenuating material is visible.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration throughout the renal cortex, multiple well-defined, roundish parenchymal filling defects are seen; measuring < 4 mm in diameter.

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

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

Protruding from the caudodorsal aspect of the left lateral liver lobe into the cranial aspect of the peritoneal cavity, an irregular shaped, heterogeneous soft tissue attenuating and contrast enhancing mass is seen, measuring 17.7. x 11.3 x 14.3 cm. The remainder of the hepatic parenchyma are uniform soft tissue attenuating and contrast enhancing.



PATIENT

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.

Canine

Both coxofemoral joints present moderate osteophyte new bone formation. The acetabular groove bilaterally is shallow and the center of the femoral heads is lateral to the dorsal acetabular rim.

BREED

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COMPUTED TOMOGRAPHIC DIAGNOSIS

SEX

- Pedunculated hepatic soft tissue mass left lateral liver lobe
- Significant volume of peritoneal effusion
- Multiple simple renal cortical cysts
- No evidence of pulmonary metastatic disease

Neutered Male

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

12

The CT study is fitting the history of marked peritoneal effusion and reveals a large hepatic mass that is originating from the left lateral liver lobe – the odds for primary hepatic neoplasia are high, such as hepatocellular carcinoma, sarcoma. The peritoneal effusion may be paraneoplastic finding – recommend tapping the peritoneal effusion including complete fluid analysis for specification. Surgical management of the hepatic mass is considered feasible.

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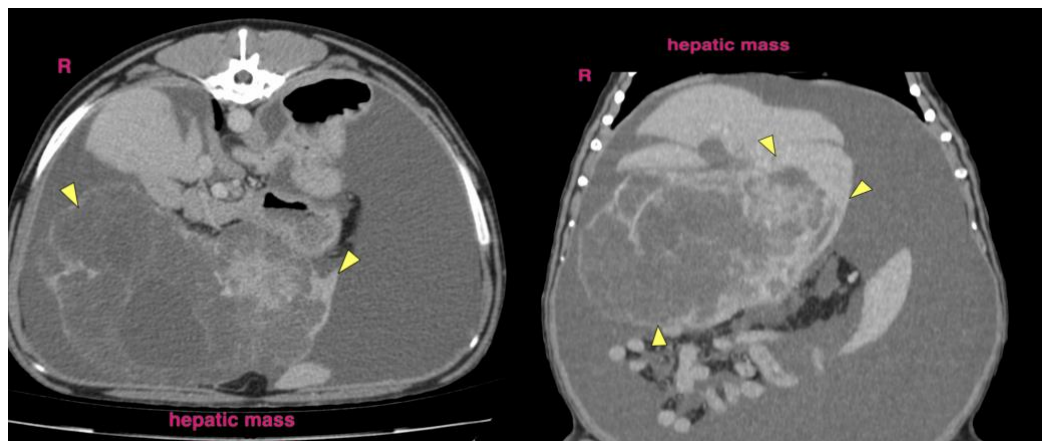
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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