



PATIENT

Angus Childs

PRESENTING CLINICAL SIGNS

Presented 1/31 for evaluation of mass proximal to RH metatarsal pad. FNA supportive of melanoma. O interested in CT Scan to investigate if it has spread. Hx of SQ lump on R ventral thorax noticed Oct 2021, no changes

SPECIES

Canine

COMPUTED TOMOGRAPHY 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 are provided for review.

BREED

Golden Retriever

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

SEX

The spinous process of T1&T2 are incompletely fused in the midline. Moderate spondylosis formation is seen level with the thoracolumbar junction.

MN

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

7 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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

Abdomen

REFERRING VET

Dr. Debbie Reynolds

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.

INVOICE

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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.

DATE

2-26-22

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

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 right medial iliac lymph node is mildly prominent.

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The lumbosacral intervertebral disc is moderately protruding into the vertebral canal.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild lymphadenopathy right medial iliac lymph node
- Degenerative lumbosacral stenosis with potential dynamic compression of the cauda equina fibers
- Spina bifida occulta T1&T2
- Spondylosis deformans
- No evidence of pulmonary metastatic spread

SEX

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mild enlargement of the right medial iliac lymph node is equivocal for reactive hyperplasia versus metastatic spread. Recommend ultrasound guided FNA sampling of the right medial iliac lymph node for further definition.

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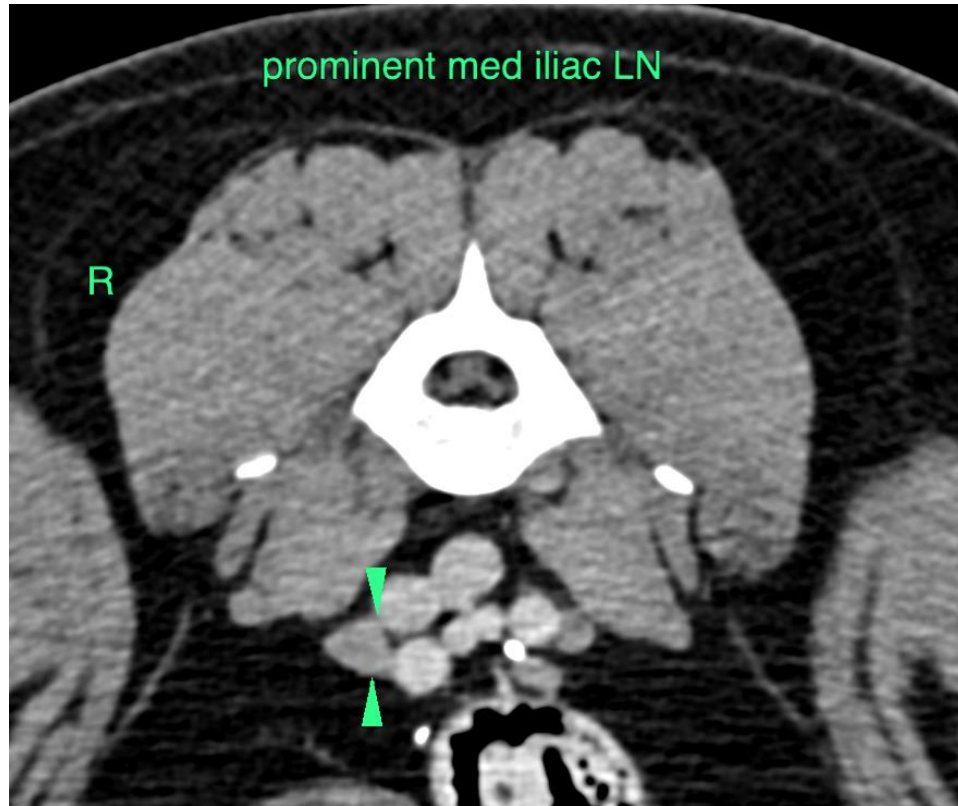
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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