



PATIENT

Vince Clarke

PRESENTING CLINICAL SIGNS

Presented for R anal sad mass. R anal sac nodule was initially noticed 3 months ago in January when they were inflamed. ~3x4cm soft, SC mass on ventral thorax - previously aspirated as a lipoma - unchanged per owners

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

Australian Shepherd

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

SEX

MN

Multifocal spondylosis formation is seen along the thoracic spine. A vacuum phenomenon is seen in the intervertebral disc space C6/C7. Both shoulder joints present moderate osteophyte new bone formation.

AGE

13 Years, 1 Month

In the subcutaneous tissue along the right ventrolateral thoracic wall, an ovoid shaped, fat attenuating mass with interspersed soft tissue attenuating regions is visible; measuring 6.8 x 6.1 x 21.6 cm in size. The fat attenuating mass at the right lateroventral thoracic wall is demarcated by a thin soft tissue attenuating capsule.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

In the subcutaneous tissue at the left ventral aspect of the sternum, a well-defined, homogeneous fat attenuating, ovoid shaped mass is visible, measuring 3.9 x 1.8 x 6.7 cm in size.

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.

HOSPITAL NAME

Animal Health
Partners

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.

REFERRING VET

Debbie Reynolds

The lung parenchyma presents the expected architecture and attenuation behavior, but mild dystelectasis of the right middle lung lobe.

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

INVOICE

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Abdomen

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

DATE

3-12-22

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.



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

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

SPECIES The hepatic volume is mild to moderately increased and the caudoventral margins are rounded and mildly protruding caudally beyond the costal arch. The hepatic parenchyma is heterogeneous soft tissue attenuating and multiple variable sized hypoattenuating regions. In the arterial post contrast phase, multiple irregular roundish hypoattenuating lesions are seen throughout the hepatic parenchyma – whereas in the delayed phase, the contrast enhancement pattern of the liver is uniform but the persistent parenchymal filling defects.

Canine

BREED

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

SEX The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout. The right anal sac presents with an ovoid shaped, strong contrast enhancing intramural mass, measuring 10 x 4 x 6 mm in size. The left anal sac is unremarkable.

MN

AGE

The intervertebral discs T12/T13 to L1/L2 are mild to moderately protruding into the vertebral canal. The lumbosacral intervertebral disc is protruding into the vertebral canal and occupying approximately up to 60% of the cross-sectional area of the vertebral canal at the same level.

13 Years, 1 Month

Both coxofemoral joints and tarsal joints present moderate osteophyte new bone formation.

INTERPRETED BY

Lipomas are seen in the fascial plane along the fascial plane medial aspect of the femora – following the femoral artery/vein.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

HOSPITAL NAME

Animal Health Partners

- History of small intramural mass right anal sac
- Hepatic cysts and in the arterial phase multiple hyperattenuating intraparenchymal hepatic nodular lesions
- Degenerative lumbosacral stenosis with compression of the caudal equina fibers
- Intervertebral disc protrusion T12/T13 to L1/L2 with possible dynamic spinal cord compression
- Degenerative osteoarthritis shoulder joints, coxofemoral joints and tarsal joints bilaterally

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- Large lipoma right thoracic wall with regions of necrosis and second lipoma left ventral thoracic wall
- Intermuscular lipomas hind limbs bilaterally
- Spondylosis deformans
- Normal hypogastric lymph center
- No evidence of pulmonary metastatic disease

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

3-12-22

The CT findings are fitting the history of an intramural mass of the right anal sac and anal sac adenocarcinoma is the top differential. There is no evidence of macroscopic metastatic disease to the tributary lymph nodes

The hepatic changes are most consistent with metabolic hepatic disease, hepatic cysts and nodular hyperplasia/small intraparenchymal adenomas ± hepatitis. The odds for malignant



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transformation of the hepatic parenchyma are considered low, ultrasound guided FNA sampling can be performed to confirm the diagnosis.

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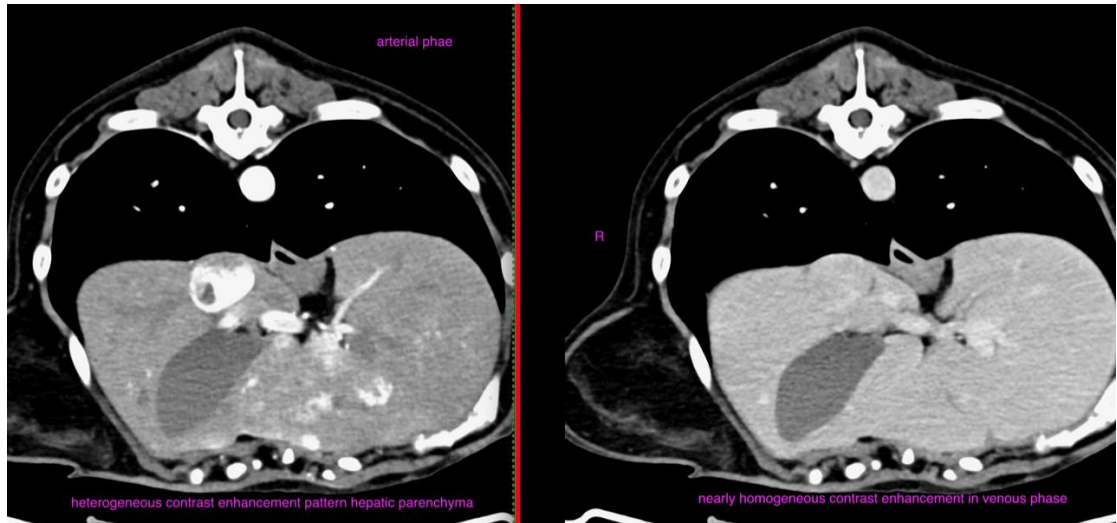
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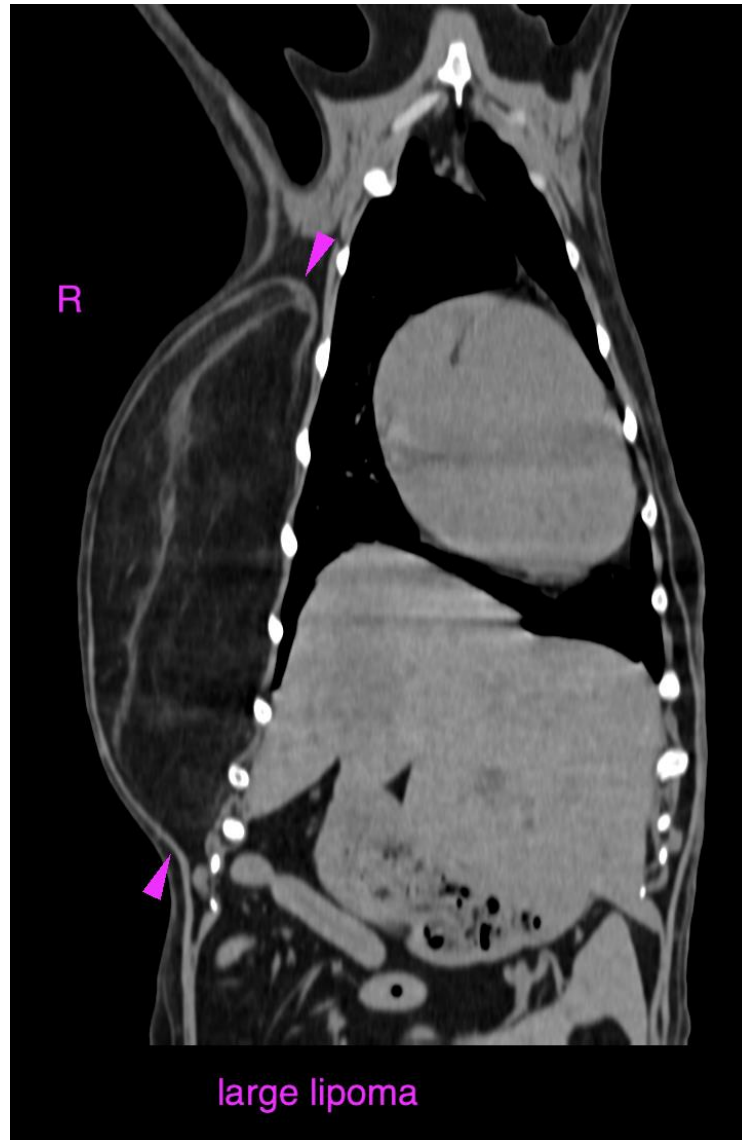
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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