



PATIENT PRESENTING CLINICAL SIGNS

Shaggy Riveira Hepatic mass/ cystic with serosanguinous fluid. RDVM Drained 2X over the past 2 weeks.

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

SPECIES A high resolution pre- and post-contrast CT study of the abdomen and a post-contrast CT study of the thorax are provided for review.

Feline

COMPUTED TOMOGRAPHIC FINDINGS

BREED Thorax

Level with the 5th left rib and extending caudally along the left ventrolateral thoracic and abdominal wall up to the level of L4, a large soft tissue attenuating peripherally contrast enhancing and central hypoattenuating mass is seen, measuring 11.1 x 9.8 x 16.7 cm in size. The mass causes distorting the costal arch, the ribs are deviated dorsally into the pleural cavity, significantly decreasing the volume of the pleural cavity bilaterally. The caudal ribs appear to be partially encompassed by the mass. The heart is deviated to the right and dorsally. The volume of the lung lobes is moderately decreased. Caudally the mass is merging with the left cranioventral abdominal wall and bulging into the peritoneal cavity. The cranial abdominal organs are deviated dorsally and to the right. Post contrast administration, the mass is peripherally contrast enhancing, presenting a hypoattenuating center and multiple finger like protrusions are bulging mildly from the periphery into the lumen of the mass.

SEX

MN

AGE

15 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

Abdomen

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

Both kidneys present a decreased volume with irregular margins. A small amount of mineral attenuating material is associated with the renal pelvis bilaterally. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

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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.

INVOICE

The pancreas has mild irregular margins with multiple small (<3 mm) roundish fluid attenuating intraparenchymal lesions.

57355

The periarticular bones of the left stifle joint present moderate osteophyte new bone formation. The patella is located at the craniomedial aspect of the medial femoral condyle.

DATE

3-22-23



PATIENT **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Shaggy Riveira

- Large cavitory mass left ventrolateral thoracic & abdominal wall causing significant distortion of the ribs with marked mass effect on the intrathoracic structures and intermuscular extend along the left abdominal wall

SPECIES

Feline

- Chronic nephropathy
- Bilateral nephrolithiasis without signs of obstruction
- Small pancreatic cysts
- Left sided medial patellar luxation
- Degenerative osteoarthritis left stifle joint

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cavitory large mass associated with the left thoracic and left abdominal wall is highly suggestive for fibrosarcoma. As the mass is closely associated with the abdominal and thoracic wall, complete surgical excision of the mass appears not feasible as it would warrant reconstruction of major parts of the thoracic and abdominal wall.

SEX

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There are no signs for metastatic disease.

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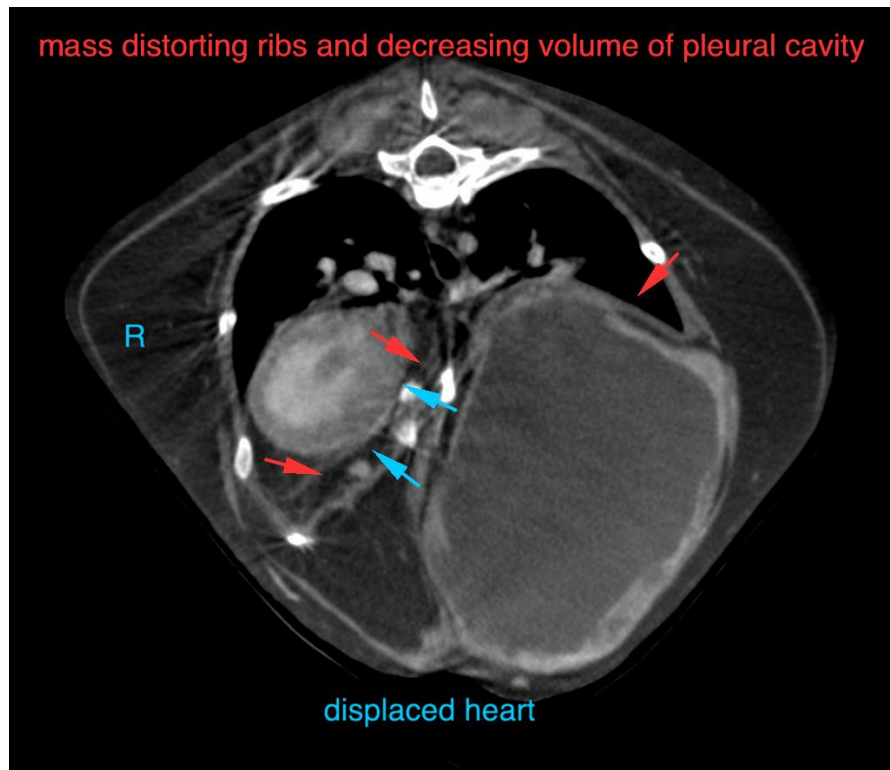
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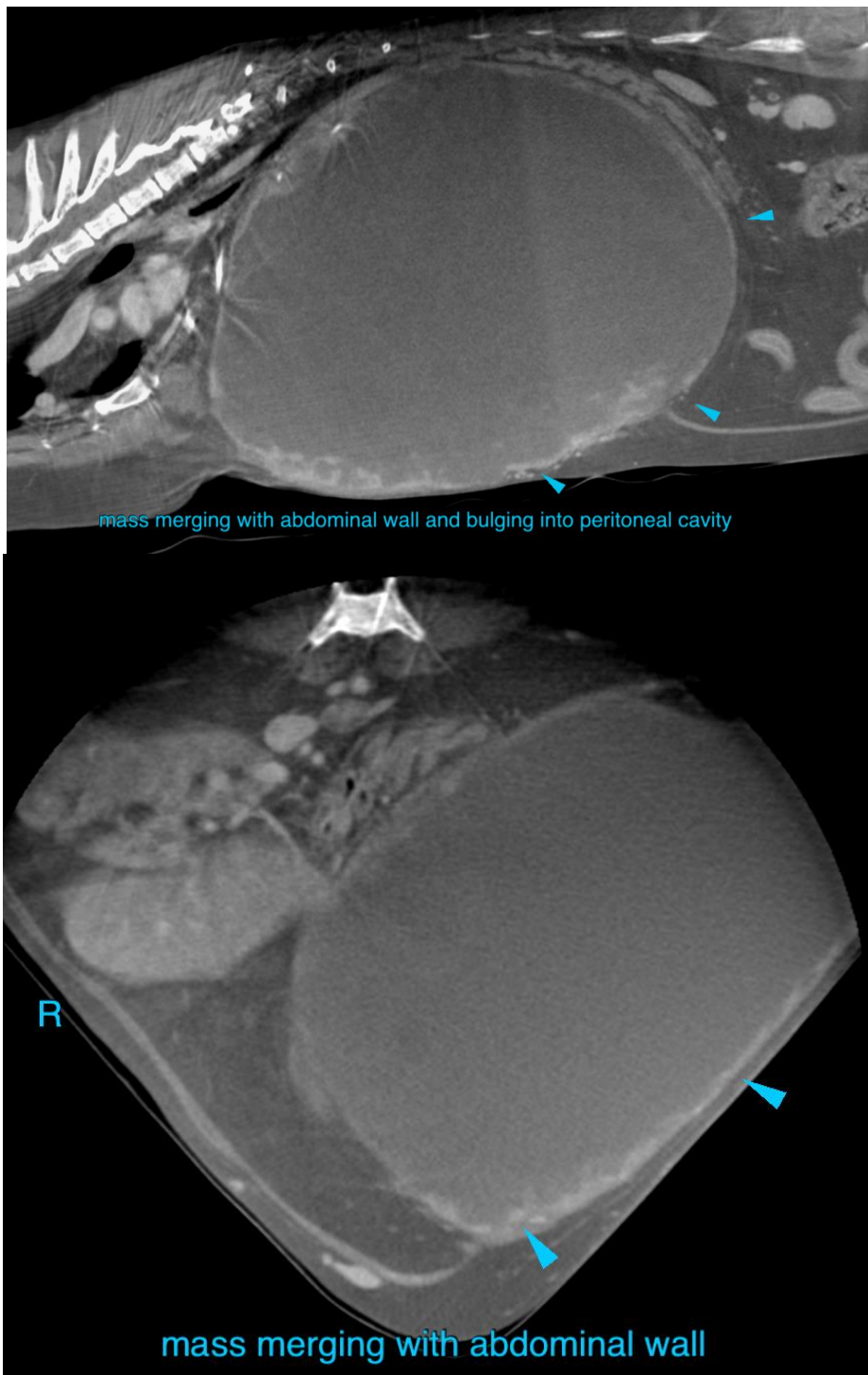
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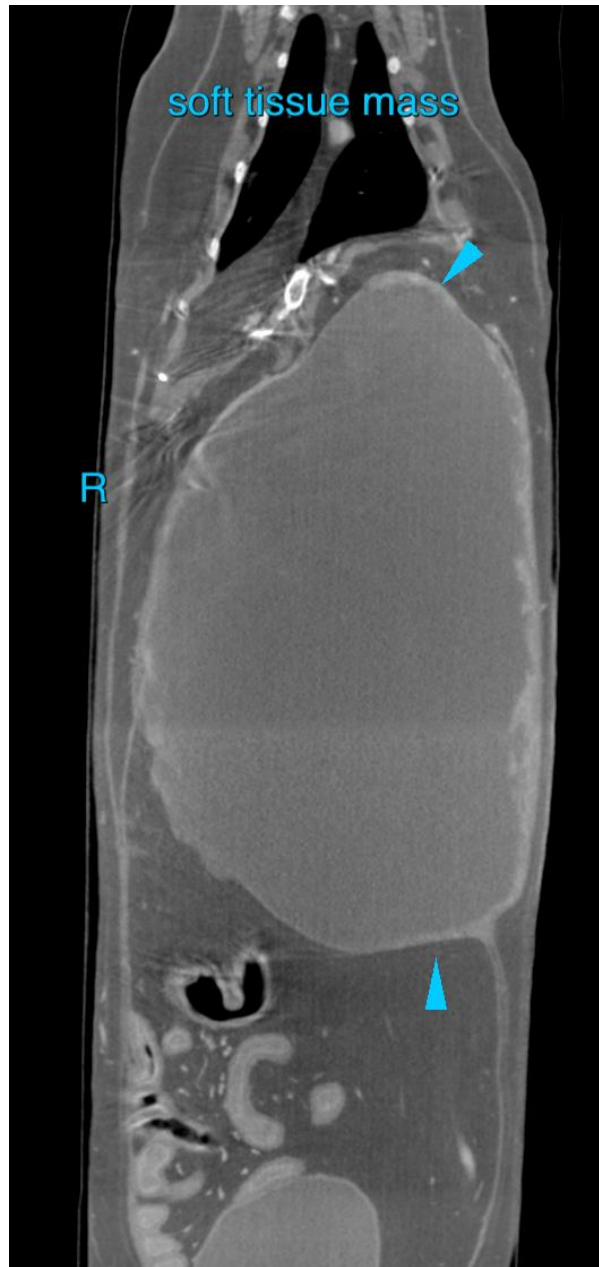
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INVOICE

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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.

DATE

3-22-23

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
sebast.schaub@gmail.com