



PATIENT

Jean-Luc Watts

SPECIES

Feline

BREED

Bombay

SEX

Neutered Male

AGE

11

WEIGHT

14

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

WS

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

Dr. McLaughlin

INVOICE

74072

DATE

3-5-26

PRESENTING CLINICAL SIGNS

- HX Firm swelling left hind popliteal
- Duration 2 month
- Biopsy confirmed hemangiosarcoma
- Non painful

COMPUTED TOMOGRAPHY OF THE THORAX, ABDOMEN AND STIFLE JOINTS

A high resolution pre- and post-contrast CT study of the hind limbs and a plain CT study of the thorax and abdomen 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 pattern is uniform.

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.

In the ventral aspect of the right middle lung lobe, an ill-defined nodular lesion is appreciated. Multifocal throughout the lung parenchyma, sporadic Ditzel are appreciated.

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.

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.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

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.

The left medial & external iliac lymph nodes and the left inguinal lymph node are mildly prominent.

Stifle joints



PATIENT

Jean-Luc Watts

SPECIES

Feline

BREED

Bombay

SEX

Neutered Male

AGE

11

WEIGHT

14

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDP

IMAGING PERFORMED BY

WS

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

Dr. McLaughlin

INVOICE

74072

DATE

3-5-26

In the left popliteal region, a uniform soft tissue attenuating and peripherally accentuated irregular contrast enhancing, roundish mass is seen; measuring 4.7 x 4.3 x 5.3 cm.

Both stifle joints present smooth margins of the periarticular bones and no evidence of an intracapsular soft tissue swelling.

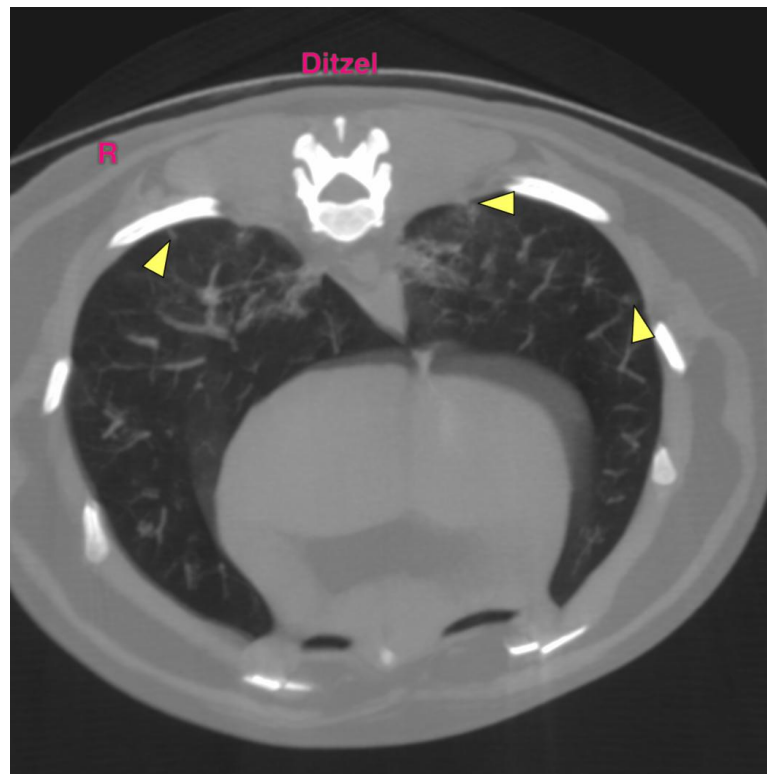
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass left popliteal region without osseous involvement
- Lymphadenopathy left medial & external iliac lymph node and left inguinal lymph node
- Multiple Ditzel throughout the lung
- Osteoarthritis coxofemoral joints due to hip dysplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left popliteal soft tissue mass is fitting the history of confirmed hemangiosarcoma. The prominent regional lymph nodes are highly concerning for metastatic spread.

The appreciated Ditzels are commonly nonspecific small soft tissue nodules with unknown dignity – however, the odds for metastasis are increased in this case – differentials would include fibrosis vs. osteomas (prioritized), granuloma, mucous impaction, pneumonia.





PATIENT

Jean-Luc Watts

SPECIES

Feline

BREED

Bombay

SEX

Neutered Male

AGE

11

WEIGHT

14

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

WS

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

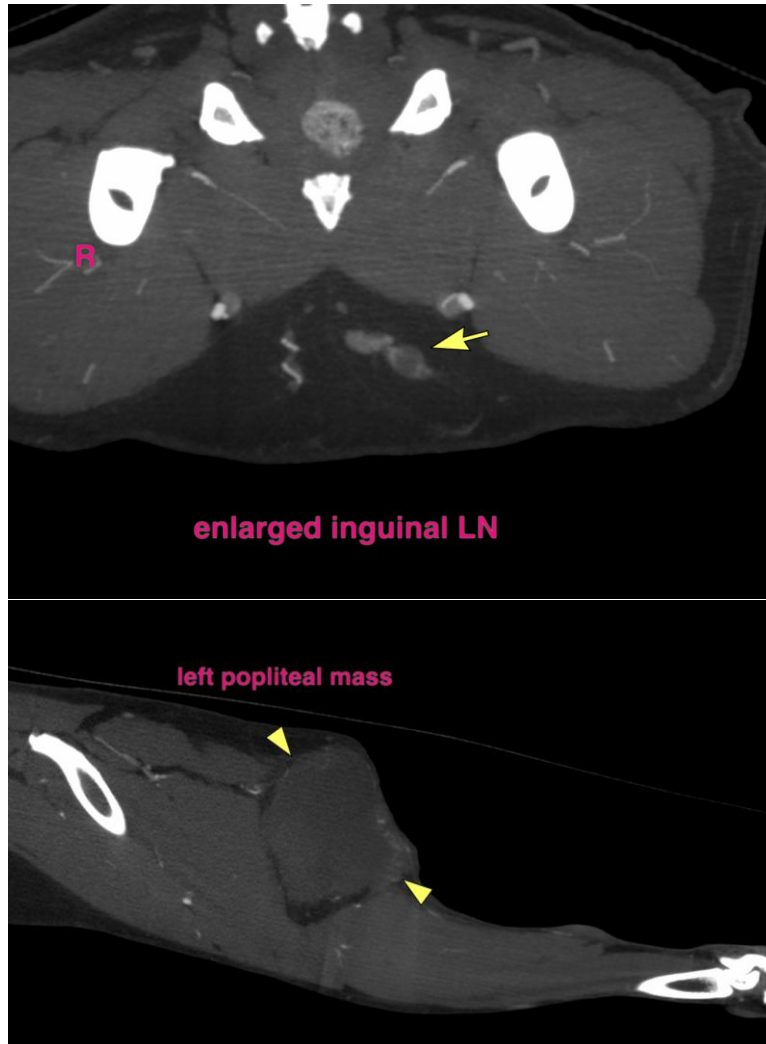
Dr. McLaughlin

INVOICE

74072

DATE

3-5-26



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