



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Stewie Bradshaw

SPECIES
Canine

BREED
Chihuahua Mix

SEX
MN

AGE
12 Years

INTERPRETED BY
Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME
Southern Oregon
Veterinary Specialty
Center

REFERRING VET
Ravi Seshadri

INVOICE
50747

DATE
3-7-22

Presented to the ER at SOVSC for distended abd, wt loss & vomiting Abdominal ultrasound:
Liver: The entire liver is effaced with a very large complexly echogenic irregularly margined mass. The only healthy liver tissue is associated with the R lateral / caudate lobe. The origin of the mass cannot be determined but is possible R medial or quadrate since the GB is displaced caudally Gall Bladder and Biliary Tree: Normal gall bladder with inability to image biliary tree. Spleen: Normal in size and echotexture with homogenous parenchyma. Lymph Nodes: No pathology noted. Bladder: No calculi, polyps, masses noted. Normal wall thickness. Kidneys: Both smooth and symmetric with normal corticomedullary junctions and pelvises. Adrenals: Normal in size and shape Pancreas: No sonographic evidence of pancreatitis. Gastrointestinal System: GI loops measure normal thickness. Notes/Comments: Hepatic neoplasia - severe intra-abdominal space occupying. Plan CT scan to assess portal vein prior to considering surgical removal. Abnormal PE/Chem/CBC/UA Results:

COMPUTED TOMOGRAPHY OF THE ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Regarding the anatomy, electronic side markers are flipped, and 'R' is indicating the right side of the patient and vice versa.

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.

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 caudoventral hepatic margins, a large, multilobulated, soft tissue attenuating and heterogeneous contrast enhancing mass is visible. Multifocal well-defined mineralization of the mass is seen. The hepatic mass is measuring approximately 13.9 x 7.5 x 10.5 cm in size. The mass is extending over the complete width of the cranial abdomen & liver. The pyloric region of the stomach is displaced caudally & dorsally. The portal vein is displaced dorsally by the mass effect and can be appreciated up to the hilar hepatic region. The gallbladder presents a right sided & caudal deviation and contains an irregular mineralized calculus, measuring 5 mm in size.

The peritoneal fat in the cranial abdomen presents moderate fat-stranding.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large hepatic mass with dystrophic mineralization
- Mild peritoneal effusion
- Cholecystolithiasis without evidence of obstruction



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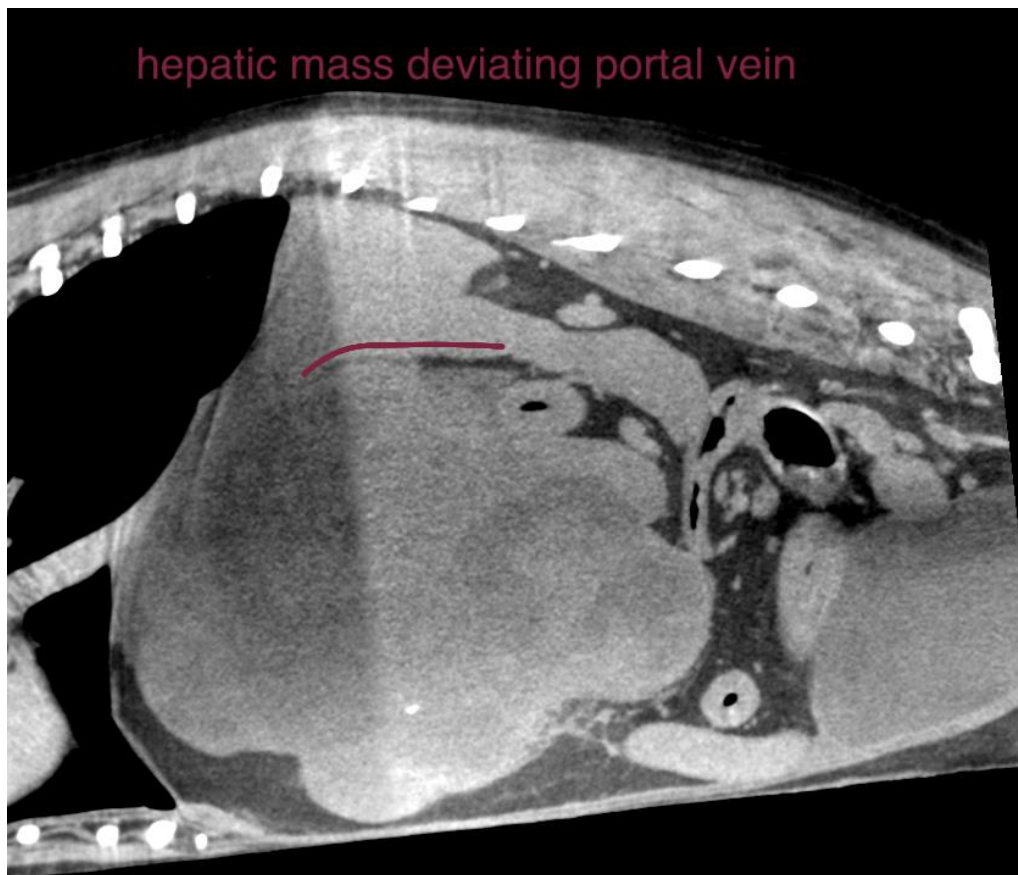
3-7-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with the history of a large hepatic mass, compatible with primary hepatic neoplasia and hepatocellular carcinoma is the top differential. The right sided and caudal deviation of the gallbladder is increasing the odds for the mass originating from the quadrate, but due to the size the exact origin cannot be determined and the determining the chances if complete surgical excision is feasible warrants diagnostic laparotomy.

The portal vein is deviated dorsally by the mass effect.

Secondary mild peritoneal effusion.





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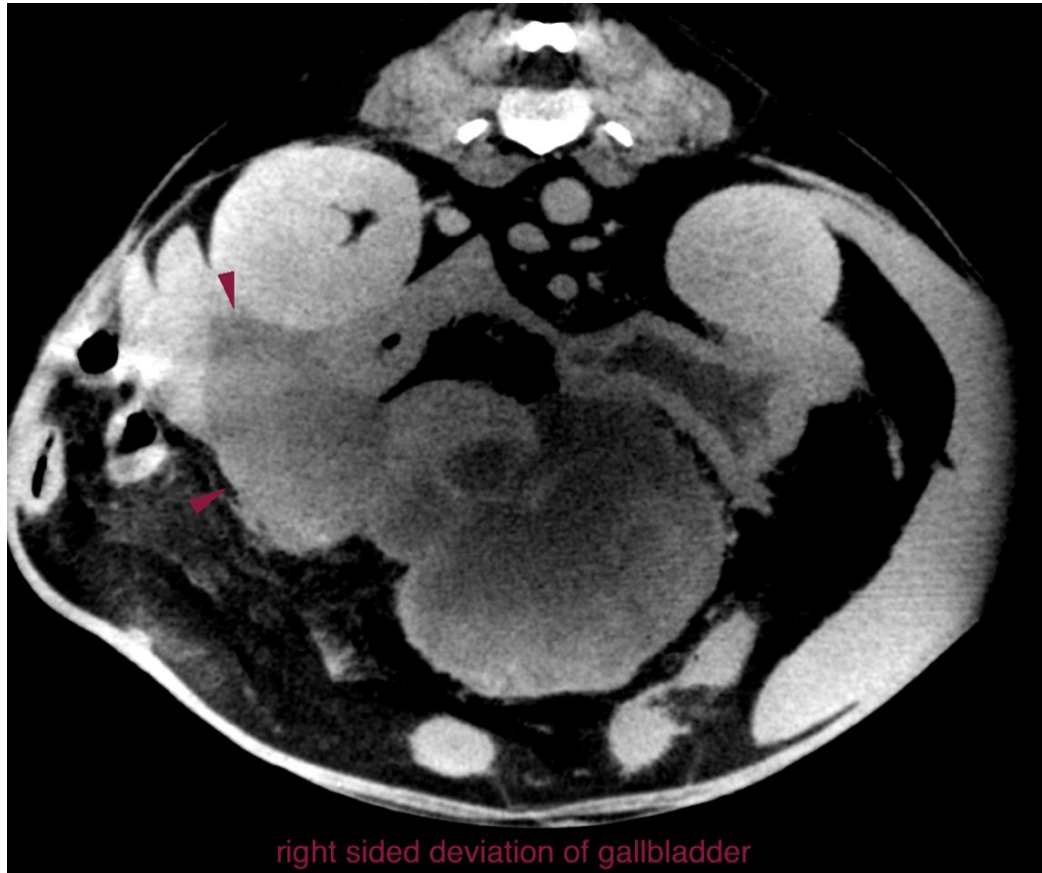
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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