


PATIENT PRESENTING CLINICAL SIGNS

Penny McEwan	Penny first presented on 4/2/21 for PU/PD and polyphagia. Based on clinical signs, and laboratory results, hyperadrenocorticism was diagnosed and she was started on trilostane. Because of lethargy, reduced appetite, weight loss and decline, the trilostane was discontinued in September 2022. Penny currently presents with a 7 month history of intermittent epistaxis from the left side, lethargy, reduced appetite and weight loss. Blood pressure 3/3/23 was 157/116, HR of 128. Abdominal Ultrasound 11/10/22 -multiple hyperechoic splenic nodules, FNA - nodular lymphoid hyperplasia.
SPECIES	Canine
BREED	Labrador Retriever
SEX	SF
AGE	12 Years
INTERPRETED BY	Sebastian Schaub, DVM Dr. med. vet. DipECVDI
HOSPITAL NAME	VetMed Consultants
REFERRING VET	Jess Anderson
INVOICE	57147
DATE	3-8-23

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

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



PATIENT COMPUTED TOMOGRAPHIC FINDINGS

Penny McEwan

Skull

The tooth element 202 is absent, the tooth is retained in the alveolar crest and the periodontal space is mildly widened.

SPECIES

Canine

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

BREED

Labrador Retriever

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

SEX

SF

Post contrast administration, protruding from the pituitary fossa into the cranial fossa, a conical shaped, significant contrast enhancing mass, sparing a central roundish filling defect is seen; measuring 15 x 11 x 13 mm in size. The diencephalon is distorted by the mass effect.

The left medial retropharyngeal lymph node is prominent.

AGE

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Thorax

Level with the intervertebral disc space T11/T12, mild mineralized material is protruding into the vertebral canal, R>L, occupying approximately 15% of the cross-sectional area of the vertebral canal at the same level.

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The periarticular bones of both shoulder joints present mild osteophyte new bone formation, R>L.

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.

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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.

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The lung parenchyma presents the expected architecture and attenuation behavior with randomly distributed interspersed punctuate mineralization.

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

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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. 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.

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



PATIENT Penny McEwan The hepatic volume is moderately increased and the liver is protruding caudally beyond the costal arch, the caudoventral margins are rounded. The hepatic parenchyma has a uniform contrast enhancing, but a well-defined parenchymal filling defect in the left lateral liver lobe, measuring 15 mm in diameter. The gallbladder presents the expected size and thin wall with fluid attenuating content.

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

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

BREED Labrador Retriever The vertebral endplates L4/L5 present moderate spondylosis formation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intracranial extraaxial significant contrast enhancing mass lesion arising from the pituitary fossa
- Hepatomegaly
- Solitary hepatic cyst
- Intervertebral disc protrusion T11/T12 with possible dynamic myelocompression
- Remaining root triadan 202 with signs of periodontal disease
- Spondylosis deformans
- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appreciated intracranial mass in combination with the history of hyperadrenocorticism is highly suggestive for function pituitary adenoma or less likely carcinoma. The adrenal glands present without abnormalities.

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The top differential for the hepatomegaly is steroid induced hepatopathy. Potentials include metabolic hepatic disease, hepatitis or diffuse neoplastic infiltration. In case of doubt, ultrasound guided FNA sampling and/or Tru-cut biopsy can be used as minimally invasive methods for further workup.

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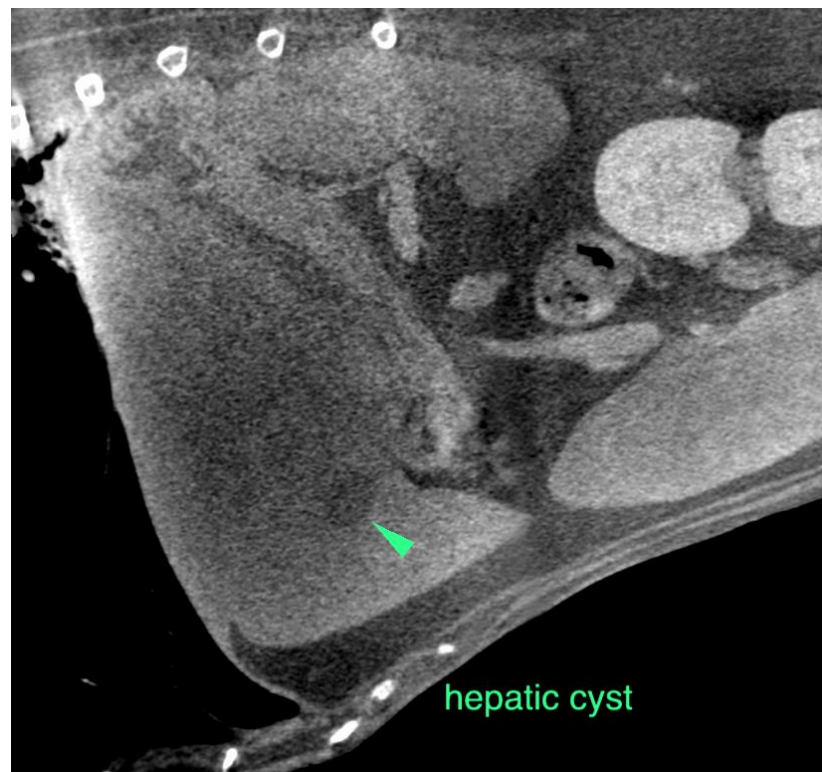
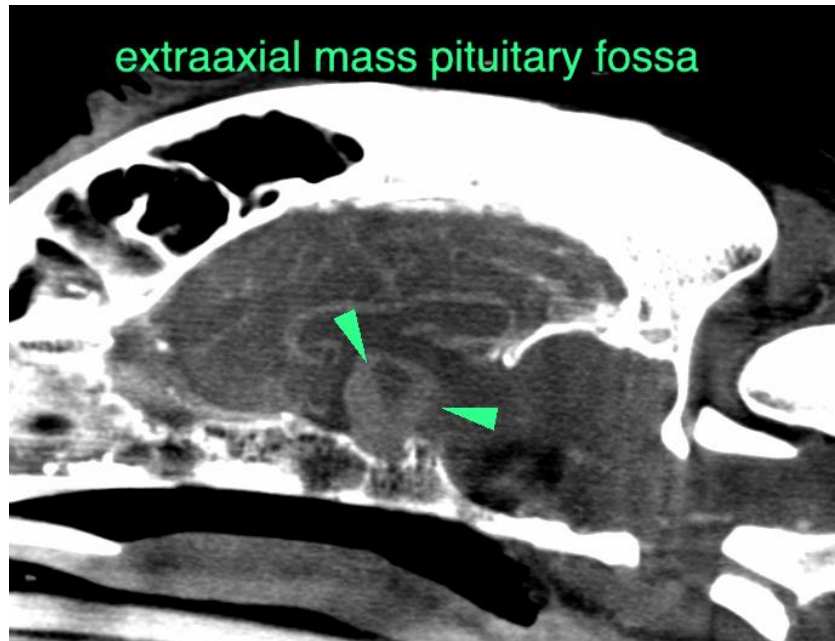
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PATIENT

Penny McEwan

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.

SPECIES

Canine

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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