



**PATIENT PRESENTING CLINICAL SIGNS**

**Trigger Lee** Chronic lumbar pain, hindlimb weakness/lameness (bilateral FHO's previously), worsening muscle atrophy. Hx of enlarged adrenal glands, small splenic mass on ultrasound but normal low dex suppression in Jan. 2022. Currently on acupuncture and rehab.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Multiple SQ masses throughout the body.

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

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.

**BREED**

**COMPUTED TOMOGRAPHIC FINDINGS**

Border Collie Mix

Thorax

Multiple subcutaneous lipomas are seen along the thoracic wall.

**SEX**

The osseous and soft tissue structures of the thoracic spine are within normal limits.

Neutered Male

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.

**AGE**

The cardiovascular structures including the pulmonary vasculature are within normal limits.

11 Years

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.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The lung parenchyma presents the expected architecture and attenuation behavior, but compression atelectasis of the caudodorsal dependent aspects of the lung due to general anesthesia.

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

**HOSPITAL NAME**

Abdomen

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The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis. The left cranioventral aspect of the abdomen is occupied by fat attenuating mass, measuring 12.7 x 6.9 x 16.5 cm in size, deviating the stomach & small intestinal loops to the right and dorsally. In the mid abdomen, level with the left kidney, a well-defined, mixed soft tissue & fat attenuating mass, measuring 4.0 cm in diameter is visible.

**REFERRING VET**

Meaux

Both kidneys present mild irregular margins. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted. On the dorsal urinary bladder wall, a very small amount of mineral attenuating material is seen.

**INVOICE**

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Nodular enlargement of the cranial pole of the left adrenal gland is appreciated, measuring up to 9.0 mm in diameter; post contrast administration the nodular lesion is centrally mild hypoattenuating.

**DATE**

4-27-22

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

Mild granular branching mineralization of the hepatic parenchyma is appreciated. The hepatic size and shape are considered within normal limits and the hepatic parenchyma is uniform contrast enhancing.



**PATIENT** The common bile duct is moderately dilated, measuring up to 6.5 mm in diameter and a small amount of mineral attenuating material is seen multifocal in the lumen of the common bile duct.

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

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

Canine The intervertebral disc L1/L2 is mildly bulging into the vertebral canal, mildly distorting the ventral epidural space at the same level. The lumbar spine is within normal limits.

**BREED** Along the abdominal wall, multiple well-defined lipomas are seen. Both femoral heads are absent and chronic osseous remodeling is seen level with the base of the femoral heads bilaterally. The acetabula are filled with osseous material. In the fascial plane medial to the left gracilis muscle, a well-defined-fat attenuating mass is seen.

Border Collie Mix

**SEX COMPUTED TOMOGRAPHIC DIAGNOSIS**

Neutered Male

- Nodular enlargement cranial pole left adrenal gland
- Intraabdominal lipoma versus hypertrophy falciform fat
- Incidental mild mineralization of the biliary tree and dilation of the common bile duct without signs of mechanical obstruction

**AGE**

11 Years

- Nodular fat necrosis mid abdomen
- Multiple lipomas along the trunk and left thigh
- History of bilateral femoral head osteotomy with secondary chronic osseous remodeling
- Mild intervertebral disc protrusion L1/L2

**INTERPRETED BY**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No clinically relevant abnormalities of the thoracic & lumbar spine are appreciated, if there is strong suspicion for compressive myelopathy recommend complementing workup by a myelographic CT study or MRI study of the spine. Degenerative myelopathy can be a source for progressive neurological deficits as well.

**HOSPITAL NAME**

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Differentials for the nodular enlargement of the cranial pole of the left adrenal include (non)functional macronodular hyperplasia, incidentaloma or early stage of neoplastic transformation (e.g. adenoma, adenocarcinoma, pheochromocytoma).

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**PATIENT**

Trigger Lee

**SPECIES**

Canine

**BREED**

Border Collie Mix

**SEX**

Neutered Male

**AGE**

11 Years

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**HOSPITAL NAME**

Mobile Pet Imaging

**REFERRING VET**

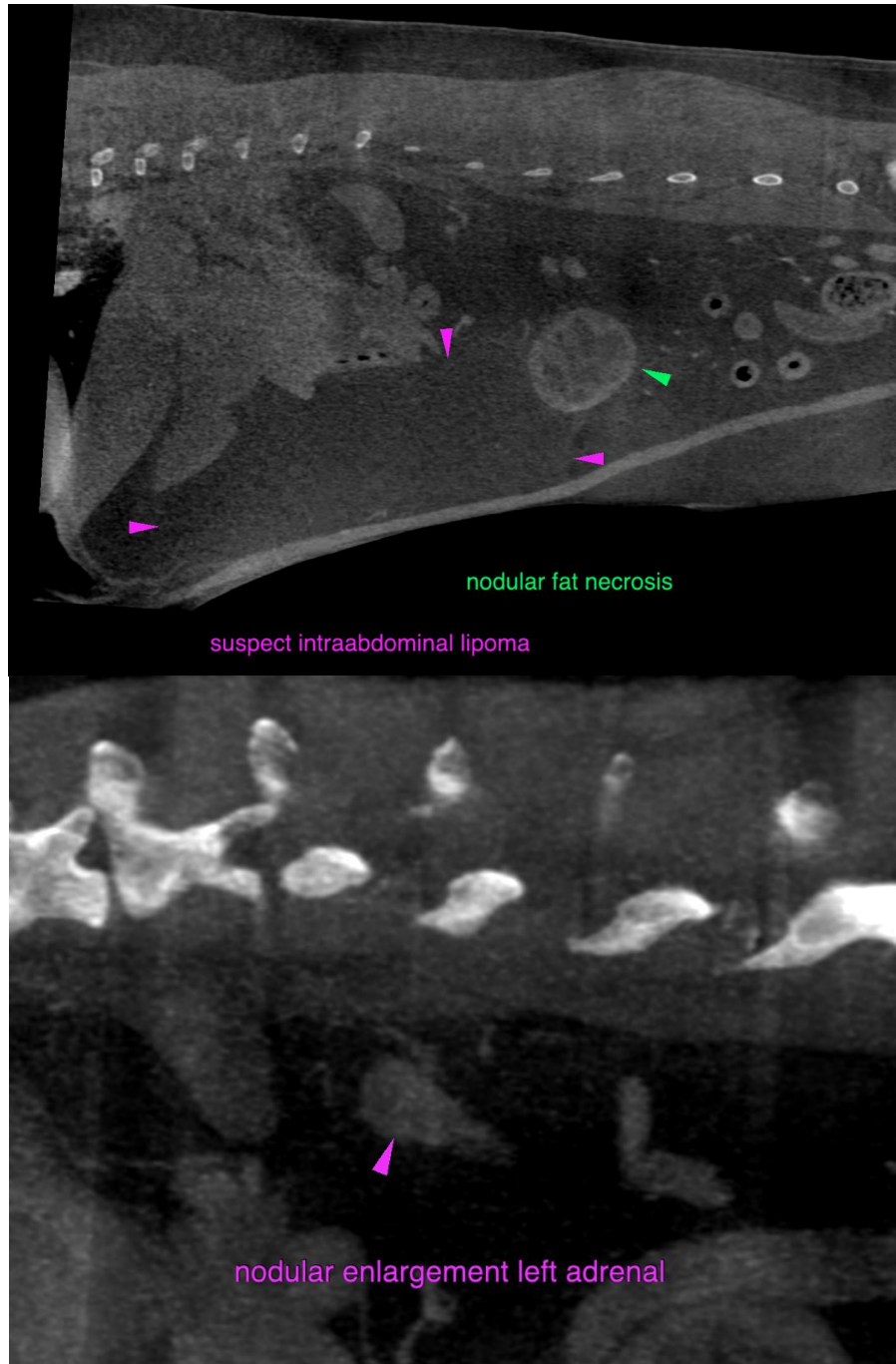
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**SPECIES**

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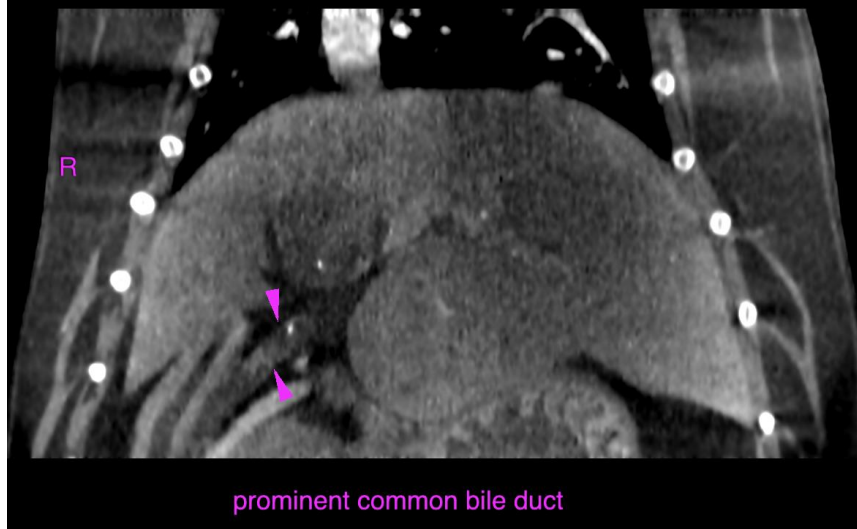
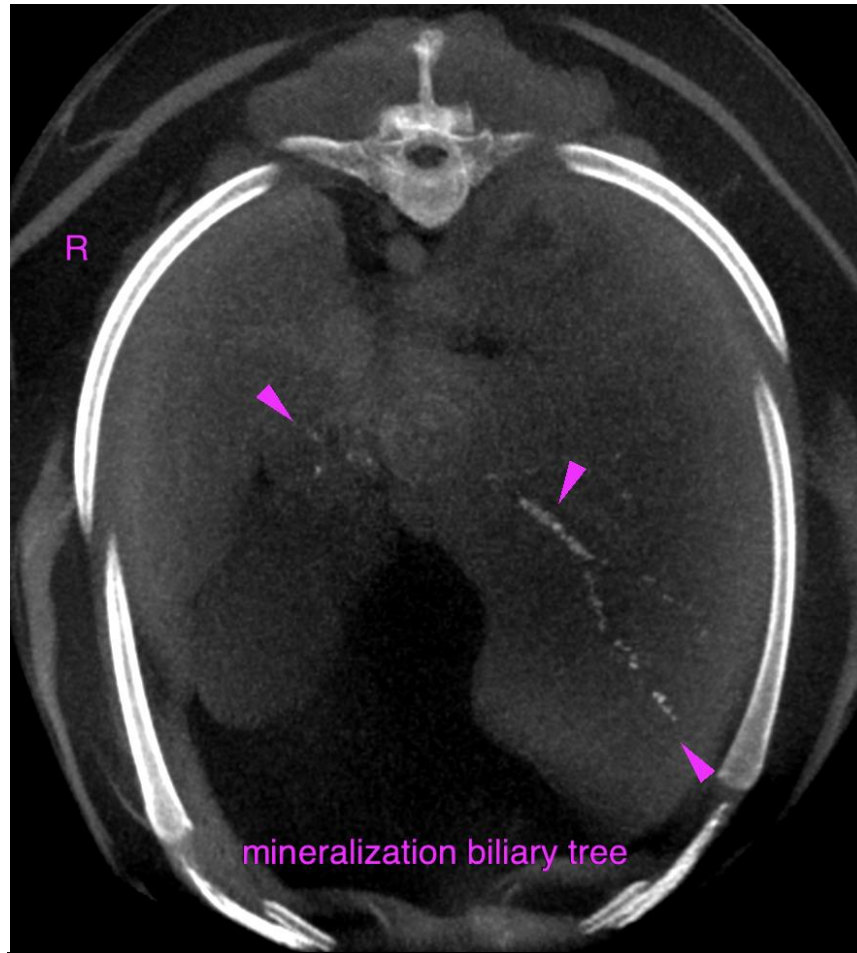
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**PATIENT**

Trigger Lee

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.

**BREED**

Border Collie Mix

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**SEX**

Neutered Male

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