



PATIENT PRESENTING CLINICAL SIGNS

Olaf Ravi Nallapan Around a month ago, owner noticed Olaf started to become weak and reluctant to go for a long walk. At the same time, owner also noticed that the abdomen started to become big. On 23rd March, owner brought him to a private clinic for blood test and x-rays. This patient was severely anemic with PCV 23% and positive for E. Canis. The WBC count is highly elevated. The private clinic gave, famotidine, doxycycline and enrofloxacin. Xrays revealed a big mass in the abdomen, pushing the intestine dorsally.

SPECIES Canine

BREED Golden Retriever

After the visit, no significant change is observed and vomiting (food content + saliva) is observed frequently observed 2 days before presented to UVH. Owner also complaint that Olaf is having inappetence and rusty urine Physical Examination: Upon presentation on 5/4/2023, Olaf looked lethargic and exercise intolerance. The mucous membrane is pale pink. T: 39-degree Celsius Diagnostic Work-up: 1. Ultrasound : a. Humongous non-vascularized mass with mixed echogenicity and irregular wall located at the right ventral abdomen, extending to the inguinal region . Suspected origin – right caudate lobe b. Spleen – NSF 2. PCV/PP: 18% / 76 g/L 3. Autoagglutination: Negative

COMPUTED TOMOGRAPHY OF THE ABDOMEN

SEX Male Castrated

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

COMPUTED TOMOGRAPHIC FINDINGS

AGE 10 Years

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.

INTERPRETED BY

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

Originating from the caudate process of the caudate liver lobe, a mild heterogeneous soft tissue attenuating mild contrast enhancing, irregular shaped mass is protruding into the peritoneal cavity, extending caudally up to the level of the bladder. The mass is measuring 24.4 x 12.8 x 33.2 cm. The pylorus is deviated to the left and dorsally and the small intestinal loops dorsally by the mass effect. The peritoneal fat surrounding the mass presents mild to moderate fat-stranding. The parenchyma of the right medial liver lobe, a parenchymal filling defect, measuring 4 mm in diameter is seen.

HOSPITAL NAME

Animal Medical Centre Sdn Bhd

The pancreas is deviated to the left and dorsally by the large hepatic mass and is partially in broad contact with the mass.

REFERRING VET

Dr. Sivan

Both coxofemoral joints present moderate to marked osteophyte new bone formation. The acetabular groove bilaterally is shallow and the center of the femoral heads is lateral to the dorsal acetabular rim. Mild stippled mineralization of the synovial capsule of the coxofemoral joints is appreciated.

INVOICE

57695

The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately 70% of the cross-sectional area of the vertebral canal at the same level.

The included parts of the caudal lung field present evidence of segmental bronchiectasis in the caudodorsal aspect of the right caudal lung lobe with segmental thickening of the bronchial wall. The included aspects of the lung present an irregular mild ground glass attenuation pattern.

DATE

4-7-23

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large hepatic soft tissue mass originating from the caudate process of the caudate liver lobe
- Mild peritoneal effusion/peritonitis surrounding the mass



- PATIENT**
- Simple solitary hepatic cyst
 - Bronchiectasis caudodorsal aspect right caudal lung lobe with mild irregular unstructured interstitial component
 - Advanced degenerative osteoarthritis coxofemoral joints bilaterally, due to hip dysplasia
 - Degenerative lumbosacral stenosis with compressive myelopathy

Olaf Ravi Nallapan

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The large hepatic mass is originating from the caudate process of the caudate liver lobe and is compatible with primary hepatic neoplasia – such as hepatocellular adenoma/carcinoma. Surgical excision of the mass appears feasible, but might be complicated by adhesions with the abdominal organs (e.g. pancreas, mesentery, common bile duct).

BREED

Golden Retriever

The appreciated bronchial changes and mild irregular unstructured interstitial pattern are suggestive for chronic inflammatory lower airway disease – primary inflammatory non-infectious versus infectious (e.g. parasitic, viral).

SEX

Male Castrated

AGE

10 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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REFERRING VET

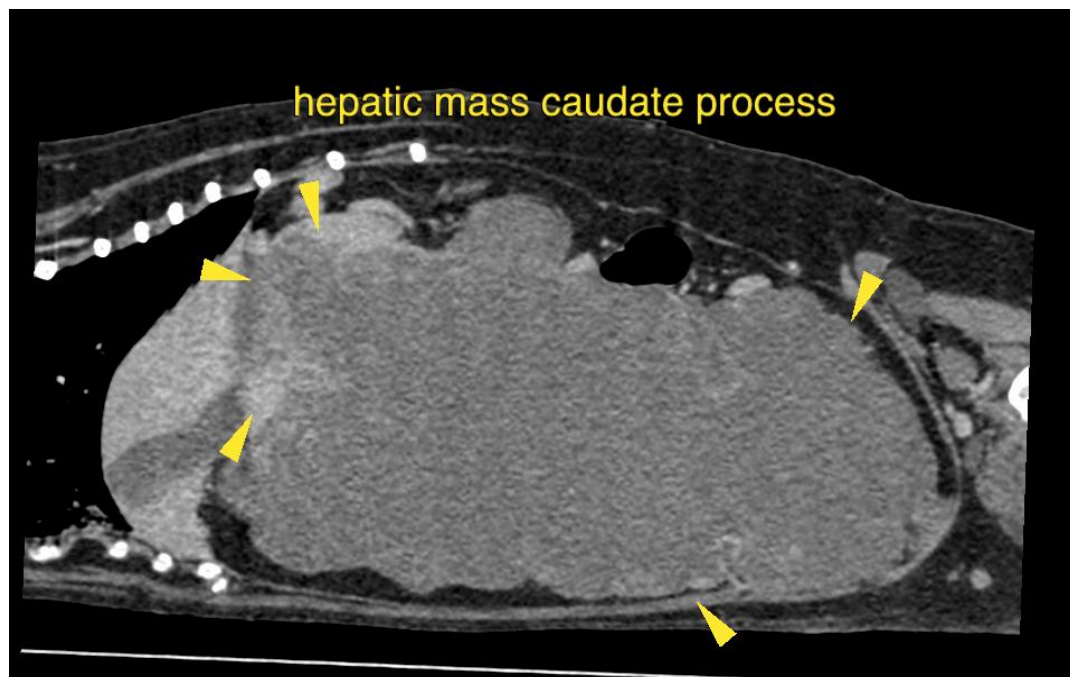
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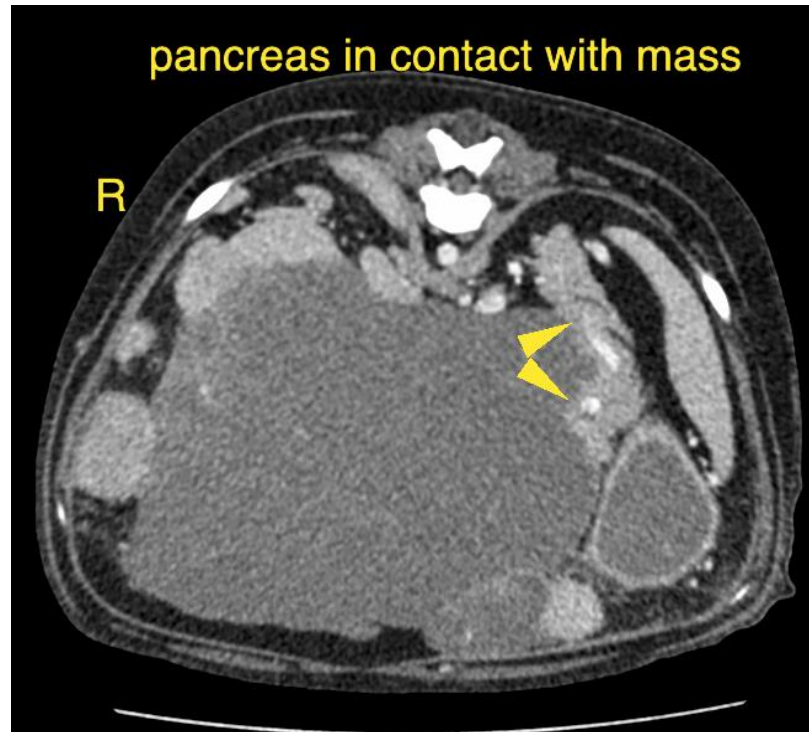
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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