



PATIENT PRESENTING CLINICAL SIGNS

Little Max Blubaugh ABD U/S- LARGE MIXED ECHOGENICITY LIVER MASS INVOLVING LEFT AND RIGHT LOBES, HYPOECHOIC NODULES DIFFUSE THROUGHOUT LIVER. CT RESULTS PENDING

SPECIES COMPUTED TOMOGRAPHY OF THE THORAX&ABDOMEN

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

BREED COMPUTED TOMOGRAPHIC FINDINGS

Boston Terrier 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 and contrast enhancement pattern is uniform and considered within normal limits.

SEX

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

AGE

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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 with interspersed punctuate mineralization. Mild compression atelectasis of the caudodorsal dependent aspect of the left caudal lung lobe is appreciated.

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.

REFERRING VET

Dr. Becton

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.

INVOICE

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Originating from the right division of the liver – suspect the right lateral liver lobe – a large, irregular ovoid shaped, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is seen, protruding caudally into the peritoneal cavity. The right hepatic mass is measuring 9.8 x 9.1 x 16.0 cm in size. The small intestinal loops are displaced caudally and to the left by the mass effect, the pylorus. the proximal segment of the duodenum and pancreas are displaced ventrally. The right hepatic mass presents a broad contact with the hepatic segment of the caudal vena cava.

DATE

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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



PATIENT
Little Max Blubaugh

normal limits throughout.
The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

SPECIES
Canine

- Large right divisional hepatic soft tissue mass
- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

BREED
Boston Terrier

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with the history of hepatic mass, regarding the mass effect, the mass is considered to be originating from the right aspects of the liver – most likely the right lateral hepatic lobe. Hepatocellular adenoma or carcinoma are considered as the top differentials here – FNA sampling can be used as advanced minimally invasive diagnostic test. The mass presents a broad contact with the caudal vena cava at the same level that may render complete surgical excision impossible. However, for final decision making, diagnostic laparotomy might be considered.

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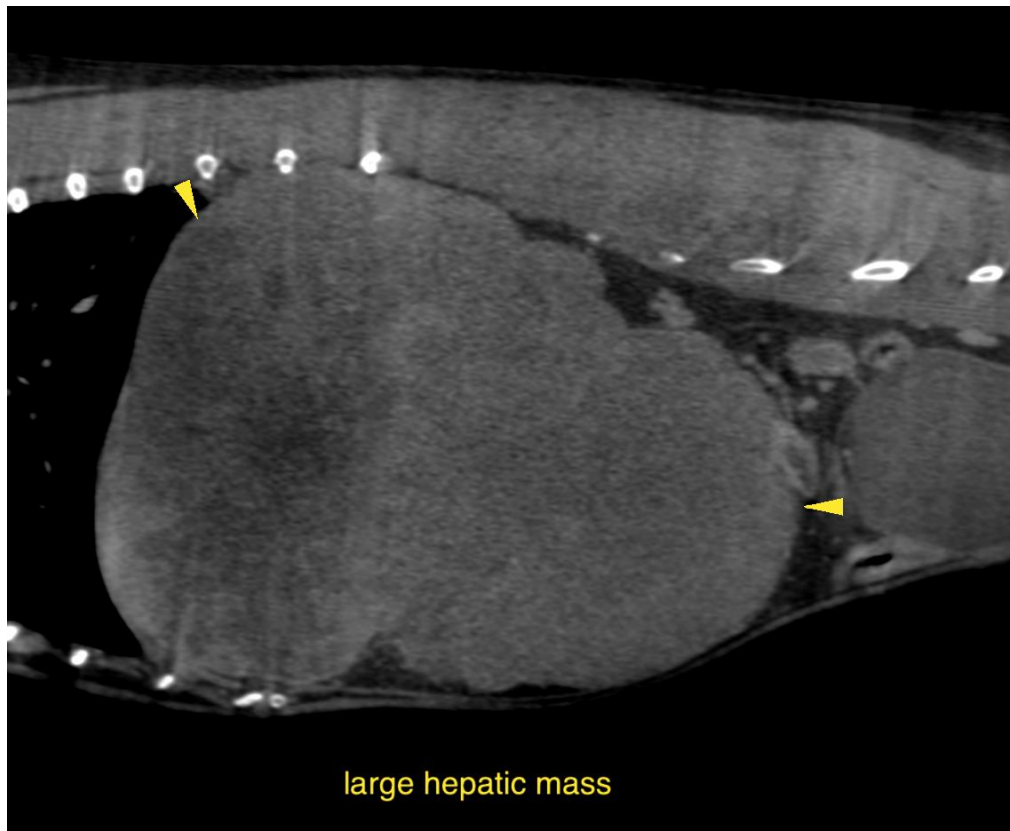
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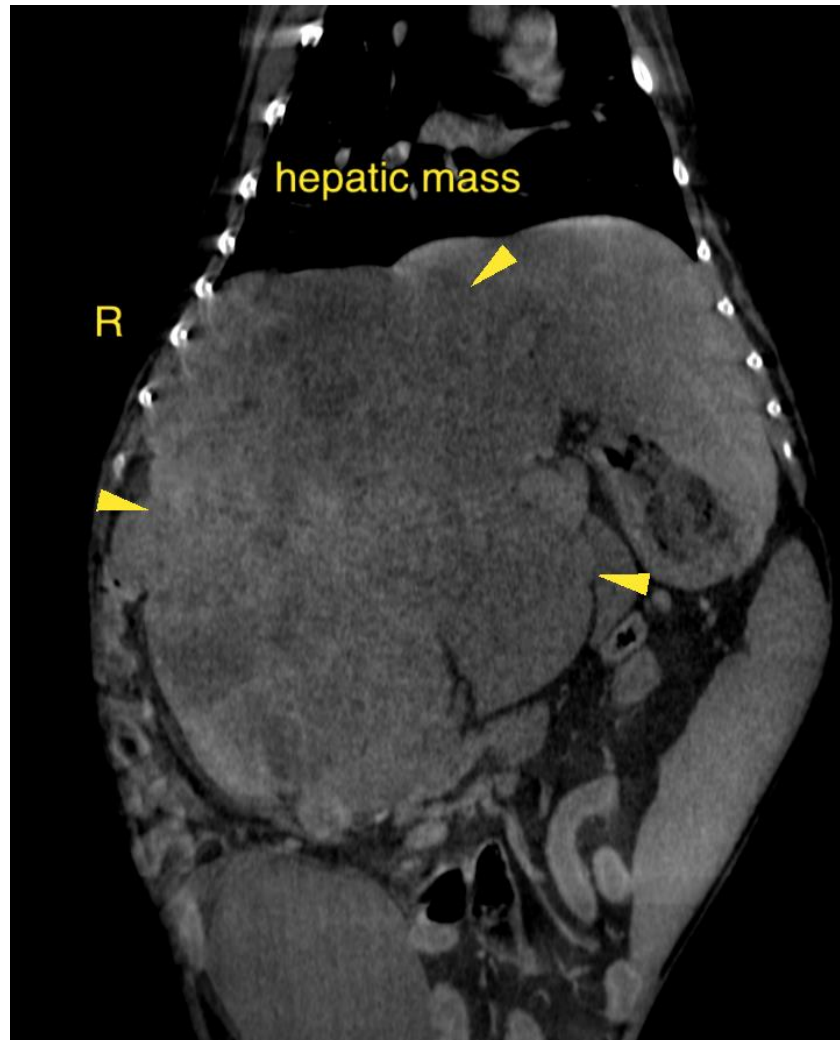
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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