



PATIENT PRESENTING CLINICAL SIGNS

Savanna Toale Presented for a progressive firm swelling in right hamstring area. On aspiration spindle cells were noted.
Abnormal PE/Chem/CBC/UA Results: Normal

SPECIES COMPUTED TOMOGRAPHY OF THE THORAX, ABDOMEN AND RIGHT HIND LIMB

Canine A high resolution plain CT study of the thorax, a plain & post contrast CT study of the right hind limb and a post contrast CT study of the abdomen are provided for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Pit Bull Thorax

The bony and surrounding soft tissue structures are within normal limits.

SEX 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.

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

AGE 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.

8 The lung parenchyma presents the expected architecture and attenuation behavior.

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

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

HOSPITAL NAME

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.

REFERRING VET

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

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

INVOICE

In the pyloric antrum, an ovoidal shaped structured, demarcated by a thin mild hyperattenuating wall and a fluid attenuating center is visible.

58214 The right medial iliac lymph node is prominent.

DATE

The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately 40% of the cross-sectional area of the vertebral canal at the same level. The vertebral endplates of the lumbosacral junction present moderate spondylosis formation.

5-9-23 Right hind limb



PATIENT The periarticular bones of the right coxofemoral joint present mild osteophyte new bone formation.

Savanna Toale In the right popliteal region, a heterogeneous soft tissue attenuating and contrast enhancing irregular spherical mass is seen, measuring 7.0 x 9.6 x 9.7 cm is seen. The mass has mild feathered margins, merging with the distal aspect of the semimembranosus & -tendinosus muscle. Multiple small tortuous vessels are seen in the periphery of the right popliteal mass. Splaying of the caudal thigh muscles by the mass effect is seen.

SPECIES

Canine

COMPUTED TOMOGRAPHIC DIAGNOSIS

BREED

Pit Bull

SEX

FS

- Soft tissue mass right popliteal region with evidence of muscular invasion
- Lymphadenopathy right medial iliac lymph node
- Degenerative lumbosacral stenosis with possible dynamic compression of the cauda equina fibers
- Mild degenerative osteoarthritis right coxofemoral joint
- Suspect gastric foreign body, possible plastic material – without signs of mechanical obstruction
- Normal thorax, no evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

8

The soft tissue mass in the left popliteal region is compatible with primary soft tissue neoplasia – such as fibrosarcoma, round cell tumor. The mass has ill-defined margins to the adjacent musculature, suggestive for muscular invasion.

INTERPRETED BY

The prominent right medial iliac lymph node is equivocal for reactive hyperplasia or metastatic disease – ultrasound guided FNA sampling can be used as advanced minimally invasive diagnostic test.

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Dr. med. vet. DipECVDI

HOSPITAL NAME

Northeast Veterinary
Referral Hospital

REFERRING VET

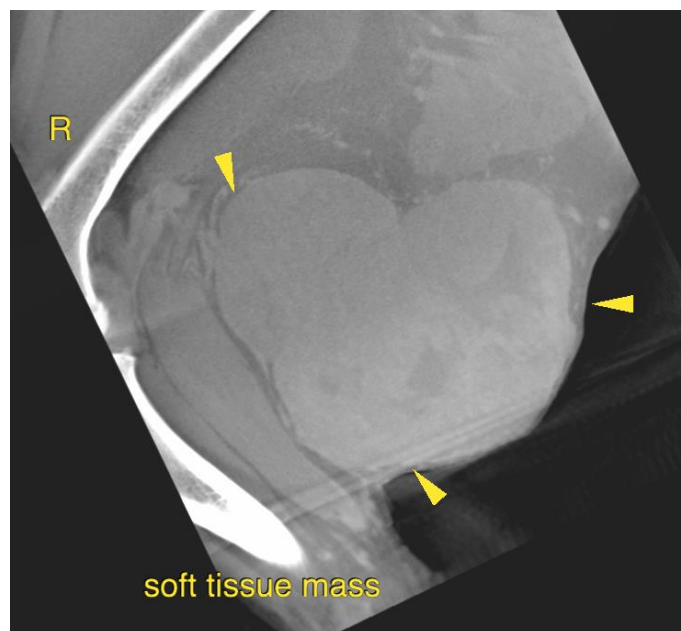
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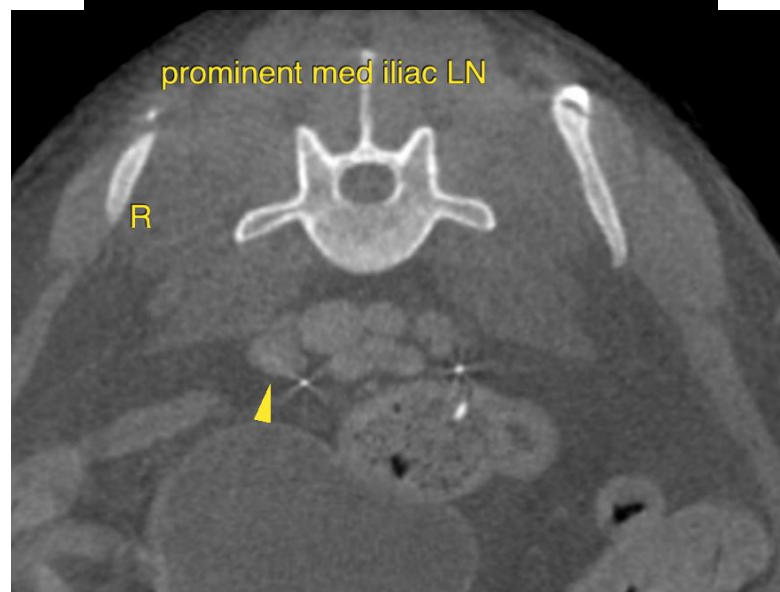
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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