



**PATIENT PRESENTING CLINICAL SIGNS**

**Kiko Cadavid** This morning - not interested in food / was not able to get up on his own - lethargic / little bit of water When the pet was on the way to the vet pet did a normal urine / bm Gagging (nothing comes up) occasionally noticed for the past week

**SPECIES** Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no obvious murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear AU. OU: lenticular sclerosis. No nasal discharge. No cough on tracheal palpation. Oral cavity: Mild dental tartar, light pk MM Musculoskeletal: BCS = 4/9. Ambulatory x 4, but needs assistance to get up. Rear end weakness and ataxic- see neuro notes. Moderate muscle atrophy on rear limbs Uro/Perineum: No significant lesions Abd/GI: Tense on palpation at caudal aspect of abdomen. No obvious masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. Painful on lumbar palpation. CP deficits on rear limbs Skin: Good hair coat. No ectoparasites seen Mentation: BAR Hydration: < 5% dehydration Fecal: Not performed today

**BREED**  
Labrador Retriever

**SEX RADIOGRAPHIC STUDY OF THE THORAX AND ABDOMEN**

**MN** A complete set of radiographs of the thorax and abdomen is provided for review.

**RADIOGRAPHIC FINDINGS**

**AGE** Thorax

11 Years The surrounding bony structures are within normal limits.

**INTERPRETED BY** The extrathoracic soft tissues present homogeneous without abnormalities.

Sebastian Schaub, DVM Dr. med. vet. DipECVDI The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

**HOSPITAL NAME** The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

DPC Veterinary Hospital The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

**REFERRING VET** The lung parenchyma presents the expected architecture with multiple randomly distributed punctuate mineralization; the intrapulmonary vascular branching is seen up to the third order lung vessels.

Rivera

**INVOICE** The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

52443 Abdomen

Multifocal moderate spondylosis formation is seen along the lumbar spine.

**DATE** No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

6-13-22 The serosal detail is moderately decreased.



**PATIENT**

Kiko Cadavid

In the mid ventral abdomen, caudal to the stomach, a roundish mass is appreciated, measuring approximately 14 cm in diameter; in the VD view, the mass appears to be located in the right cranial abdomen. The peritoneal fat level with the mass presents moderate fat-stranding, effacing the margins of the mass. The small intestinal loops are displaced caudally and dorsally by the mass effect.

**SPECIES**

Canine

The liver is appropriate in position, size and presents uniform opacity.

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

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Labrador Retriever

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

The stomach is in its anticipated position and presents normal content.

**SEX**

The colon is seen in the expected position and presents with appropriate content.

MN

**RADIOGRAPHIC DIAGNOSIS**

- Mid ventral abdominal soft tissue mass with surrounding peritonitis/peritoneal effusion
- Pulmonary osteomas
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

**AGE**

11 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The abdominal mass is most suggestive for mass originating from the spleen. A pedunculated hepatic mass, lymphadenopathy, intestinal, pancreatic or peritoneal mass are considerations and neoplasia appears as the top differential, other potentials include hematoma, nodular hyperplasia (spleen only), cyst or granuloma.

**HOSPITAL NAME**

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The peritoneal effusion can indicate hemorrhage due to laceration of the mass or peritonitis.

An abdominal ultrasound examination or CT study of the abdomen can be used for further definition and potential surgical planning.

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**REFERRING VET**

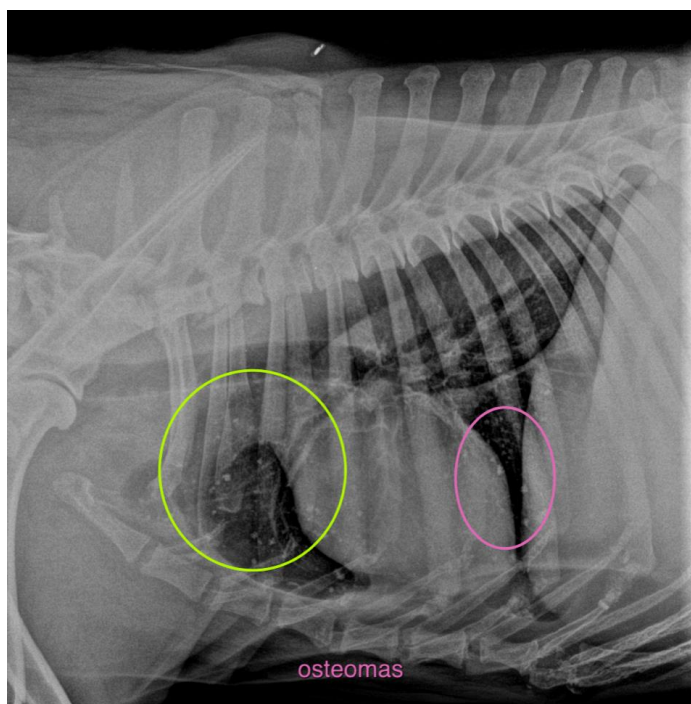
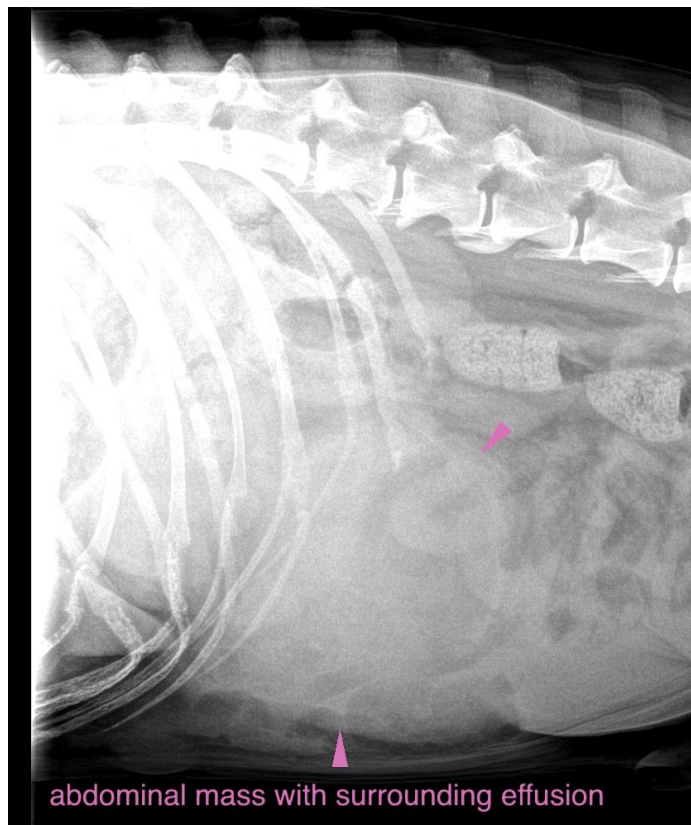
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Kiko Cadavid

**SPECIES**

Canine

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.

**BREED**

Labrador Retriever

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.

**SEX**

MN

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