



**PATIENT**

Rockness Poirier

**SPECIES**

Canine

**BREED**

American Bulldog Mix

**SEX**

Male Neuter

**AGE**

12 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

St. Catherine's Animal  
Hospital

**REFERRING VET**

Dr. Bekhit

**INVOICE**

52607

**DATE**

6-27-22

**PRESENTING CLINICAL SIGNS**

Loosing weight, lost around 8 lb within the last 3 months. No eating in the last 3 days. Lethargic / depressed. Vomited 2-3 times two days ago, no vomit since then. Soft stool in the 1st few days. Heart murmur grade 3/6 No coughing. Panting. Difficult walking on both hind leg on and off. Deaf. On Thyro tab 0.8 mg BID  
Abnormal PE/Chem/CBC/UA Results: Blood work indicate mild increase in ALT 205 (120), increase in ALP 534 (0-140), increase in GGT 31 (0-14), otherwise unremarkable. U/A result pending.

**RADIOGRAPHIC FINDINGS**

Thorax

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

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.

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.

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

Multifocal throughout the lung parenchyma, well-defined, roundish soft tissue opaque nodular lesions are appreciated, measuring up to 2.6 cm in diameter.

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

Abdomen

Multifocal moderate spondylosis formation is seen along the lumbar spine. The periarticular bones of the coxofemoral joints present mild osteophyte new bone formation.

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

The serosal detail is decreased, and the peritoneal fat presents a moderate soft tissue striation.

There is marked enlargement of the hepatic volume and the caudal margins of the liver present a convex shaped caudal border. The gastric axis is deviated caudally.

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.

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 presents normal content.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen



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within the small intestinal loops and considered within normal limits.

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

**RADIOGRAPHIC DIAGNOSIS**

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- Hepatic soft tissue mass
- Structured nodular interstitial lung pattern
- Mild peritoneal effusion
- Mild degenerative osteoarthritis coxofemoral joints bilaterally
- Spondylosis deformans

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

The findings hepatic mass indicates hepatic neoplastic disease with pulmonary metastatic disease. Differentials include hemangiosarcoma, hepatocellular carcinoma, neuroendocrine hepatic neoplasia, cholangiocellular carcinoma, other. Secondary mild to moderate peritoneal effusion.

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An abdominal ultrasound examination can be used for further definition and will allow FNA sampling for further definition.

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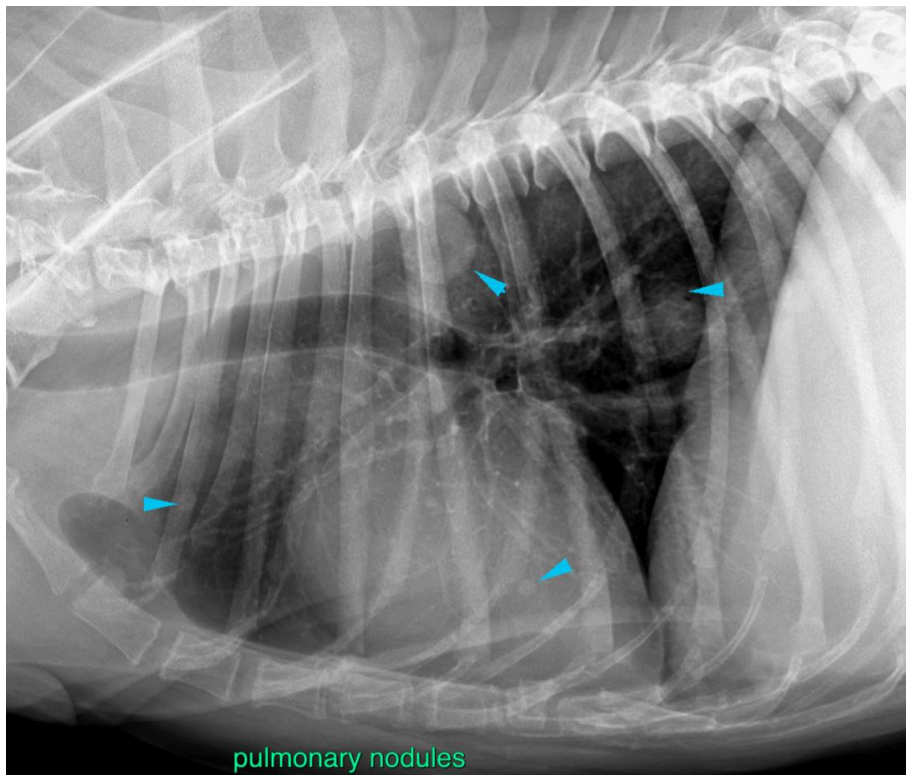
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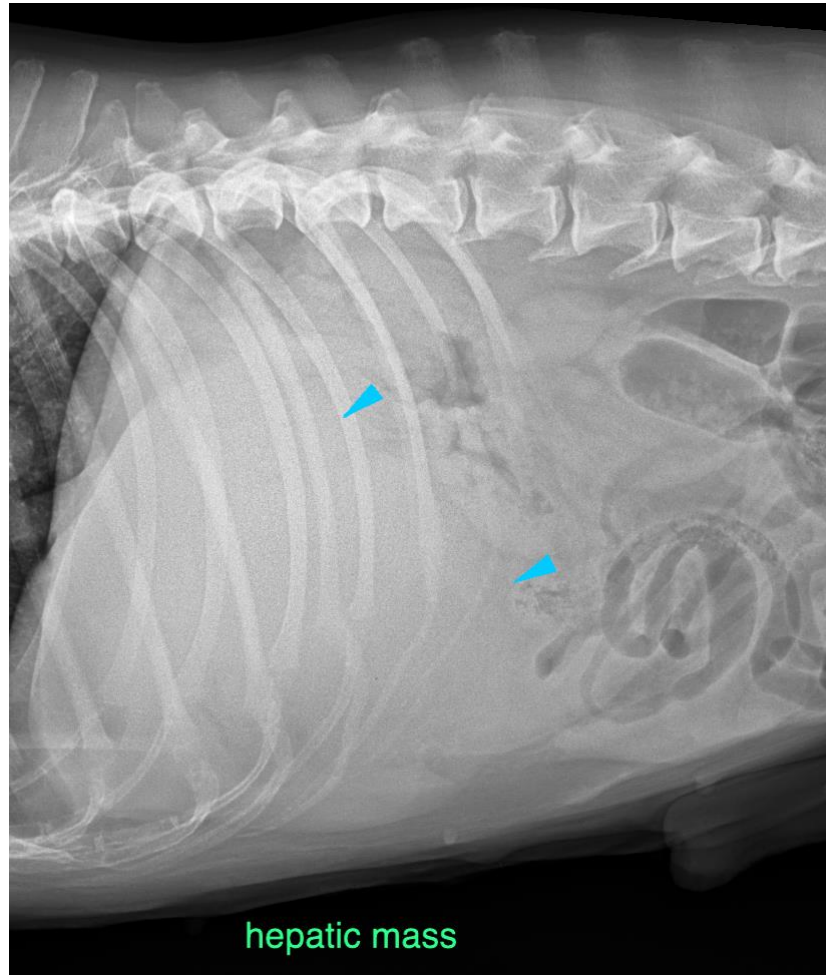
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com