



PATIENT PRESENTING CLINICAL SIGNS

Cutie Stone ~4 month history of elevated liver values on routine bloodwork. ~6 weeks of decreasing energy and appetite, with concurrent increases to ALT/ALP/GGT/TBILI. She has also had intermittent vomiting and loose stool. Ultrasound reported to have cholangitis, possible cirrhosis vs hepatitis. Long term hx of cutaneous lupus, not currently being medically managed. Abnormal PE/Chem/CBC/UA Results: ALT 166, GGT 17, and BUN 3 today. ALP normal at 108 today.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE ABDOMEN

BREED

Boxer Mix

A pre- and post-contrast CT study of the abdomen in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FS

The post contrast study is an early arterial phase – there is a lack of contrast enhancement of the parenchymal organs.

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis. Metal attenuating surgical clips are appreciated in the region of the absent ovaries.

AGE

11 Years

Both kidneys present within normal limits for size, shape and organ architecture.

The adrenal glands are within normal limits for size, shape and organ architecture.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma.

The hepatic volume is mild to moderately decreased and the hepatic margins are mildly serrating. The gastric axis is oriented cranially. The hepatic parenchyma is uniform soft tissue attenuating.

The hepatic lymph nodes are prominent.

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The gallbladder contains a moderate amount of mild heterogeneous hyperattenuating biliary sludge.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

REFERRING VET

Gover

In the subcutaneous tissue along the abdominal wall/gluteal region, multiple well-defined nodular lesions are appreciated.

The intervertebral discs L2/L3 and L5/L6 to L7/S1 are mildly protruding into the vertebral canal, distorting the ventral epidural space at the same level.

INVOICE

52613

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

6-28-22

- Microhepatica with mild serrating margins
- Lymphadenopathy hepatic lymph nodes
- Biliary sludge without signs of obstruction
- Multiple non-specific subcutaneous soft tissue nodules



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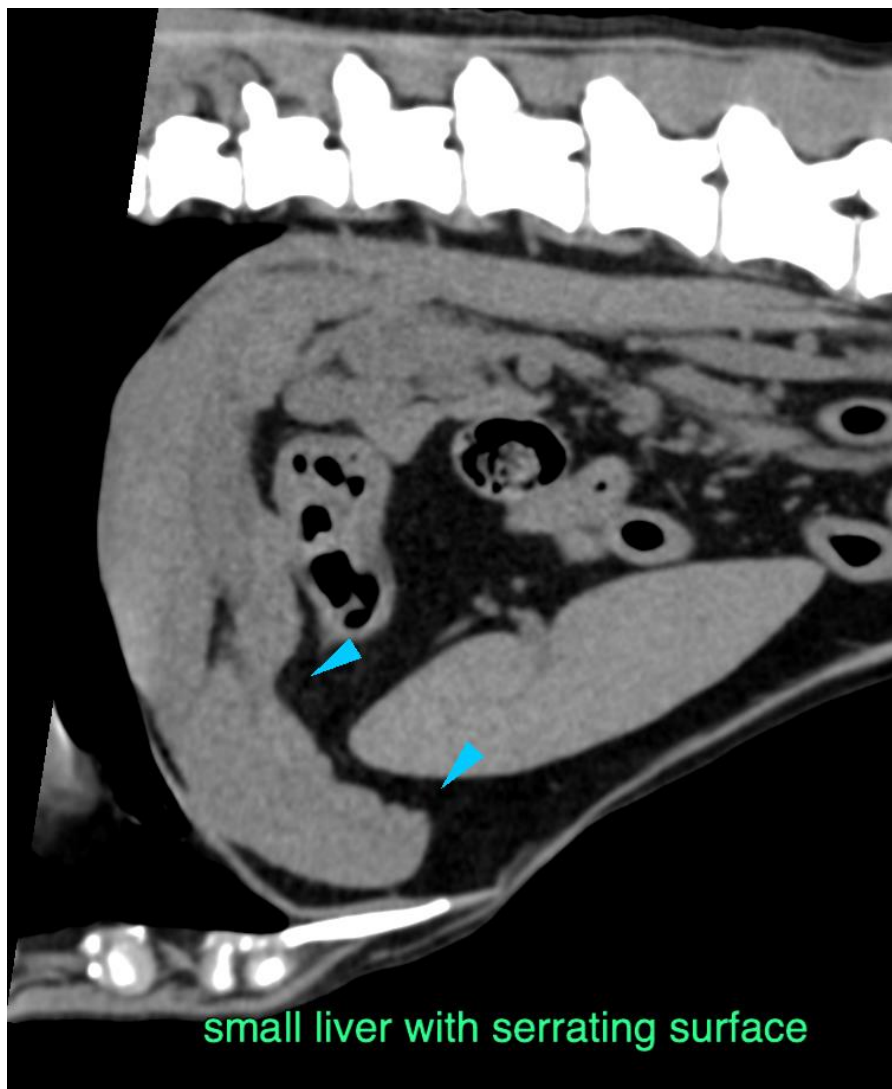
6-28-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The microhepatica in combination with the irregular margins is suggestive for underlying chronic hepatitis or cirrhosis. At this point there is no sign for portal hypertension. Hepatic biopsy can be used for further workup.

The prominent hepatic lymph nodes are suggestive for reactive hyperplasia, FNA sampling can be used to confirm the diagnosis and ruling out neoplastic infiltration entirely.

Unfortunately, the post contrast study is an early arterial phase only, not allowing evaluation of the contrast enhancement pattern of the parenchymal organs.





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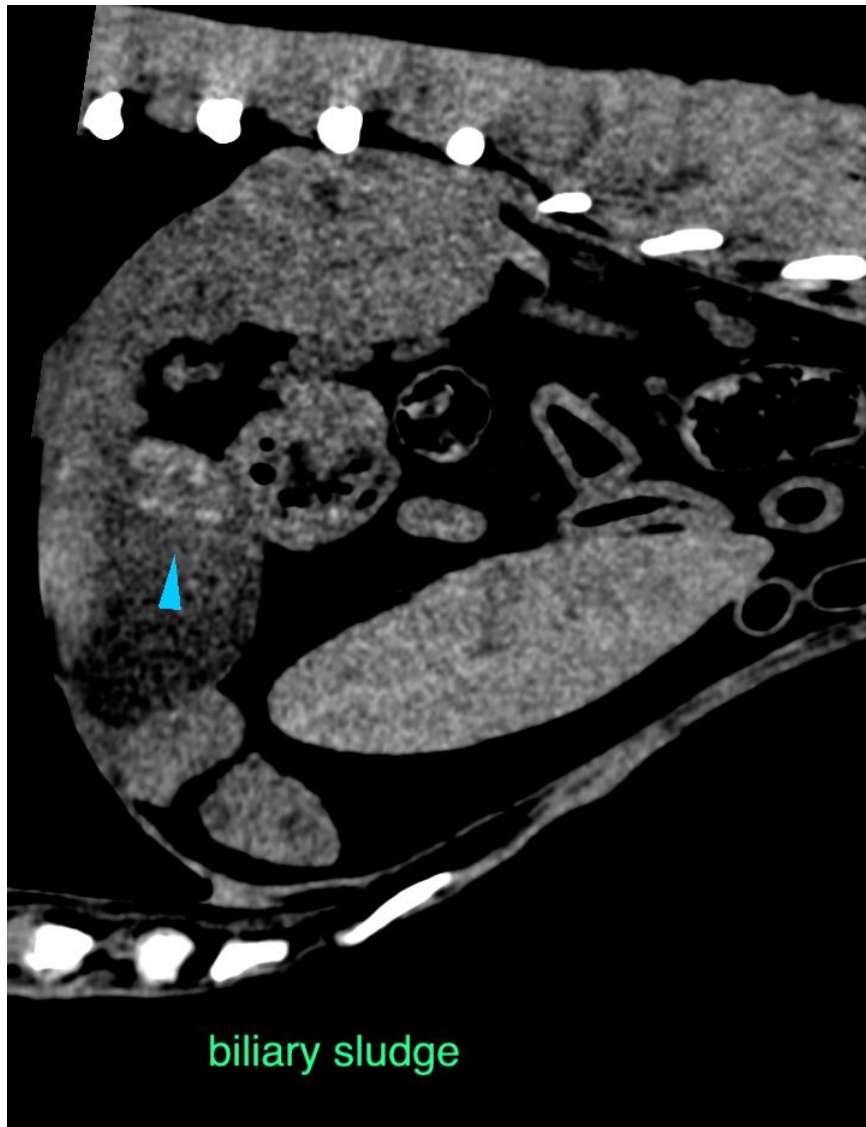
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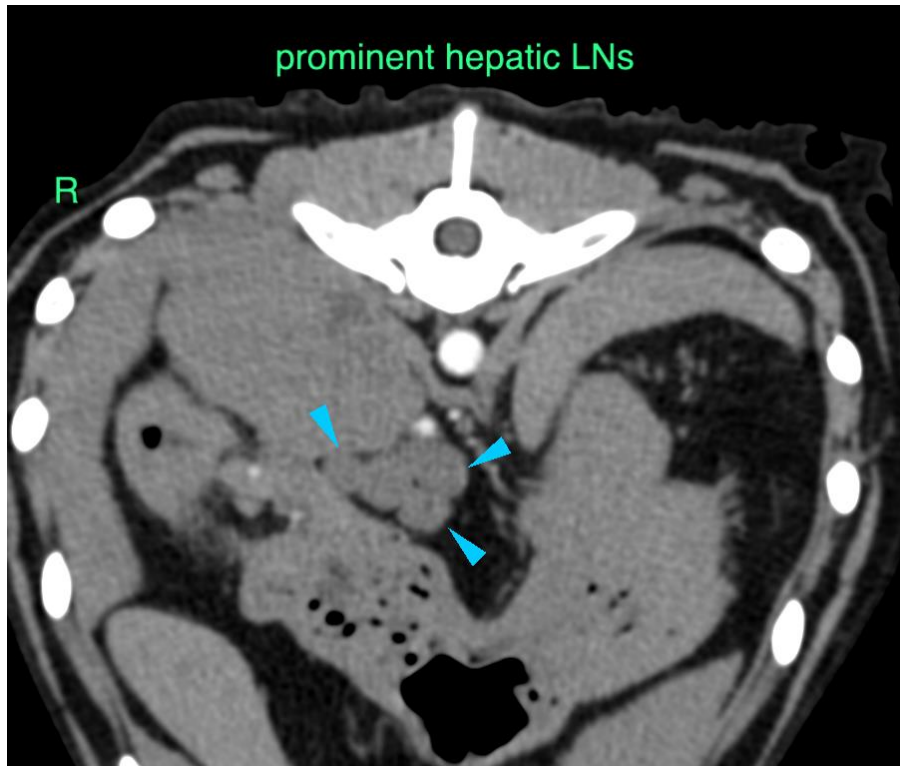
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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