



PATIENT PRESENTING CLINICAL SIGNS

Oliver Attard IM consult last week for chronic diarrhea + straining/pain during BMs. Noted rectal mass on exam. Recommended proceeding with CT scan + sampling from rectal mass + any enlarged LN's to further investigate

SPECIES COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

Canine A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction are provided for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Yorkie X Thorax

The vertebral endplates T10/T11 present mild ventral spondylosis formation. The intervertebral disc T11/T12 is mildly protruding into the vertebral canal

SEX
MN 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.

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

7 Years In the caudodorsal aspect of the right caudal lung lobe, a roundish soft tissue attenuating and uniform mild contrast enhancing nodule, measuring 15 x 10 x 13 mm in size is appreciated – the accompanying bronchus is mildly distorted by the mass. Multifocal throughout the lung parenchyma, well-defined round nodules, measuring up to 4 mm in size are visible.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

Abdomen

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The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis. A separate right & left caudal vena cava of the pre-renal segment is appreciated.

Both kidneys present within normal limits for size, shape and organ architecture. A moderate amount of mineral attenuating material is associated with the renal pelvis bilaterally. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

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

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

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The gallbladder contains a mild amount of sedimented biliary sludge.

A prominent splenic lymph node is appreciated.

DATE

6-29-22

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

Starting level with the cranial aperture of the pelvic inlet and extending caudally approximately just cranial to the anus, irregular circumferential thickening of the rectal wall is appreciated, measuring up to 7.5 mm in width.



PATIENT Generalized mild to moderate enlargement of the hypogastric lymph nodes is appreciated.

Oliver Attard The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- SPECIES**
- Intramural irregular circumferential rectal mass
 - Lymphadenopathy hypogastric lymph nodes and one splenic lymph node
 - Structured nodular interstitial lung pattern
 - Nephrolithiasis without signs of obstruction
 - Mild intervertebral disc protrusion T11/T12 without compressive myelopathy
- Canine
- BREED**
- Double caudal vena cava, pre-renal segment
 - Spondylosis deformans
- Yorkie X

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX The rectal mass is highly suggestive for primary rectal neoplasia with carcinoma being the top differential. The enlargement of multiple hypogastric lymph nodes, one splenic lymph node and the structured nodular interstitial lung pattern are highly suggestive for metastatic disease.

MN

AGE

7 Years

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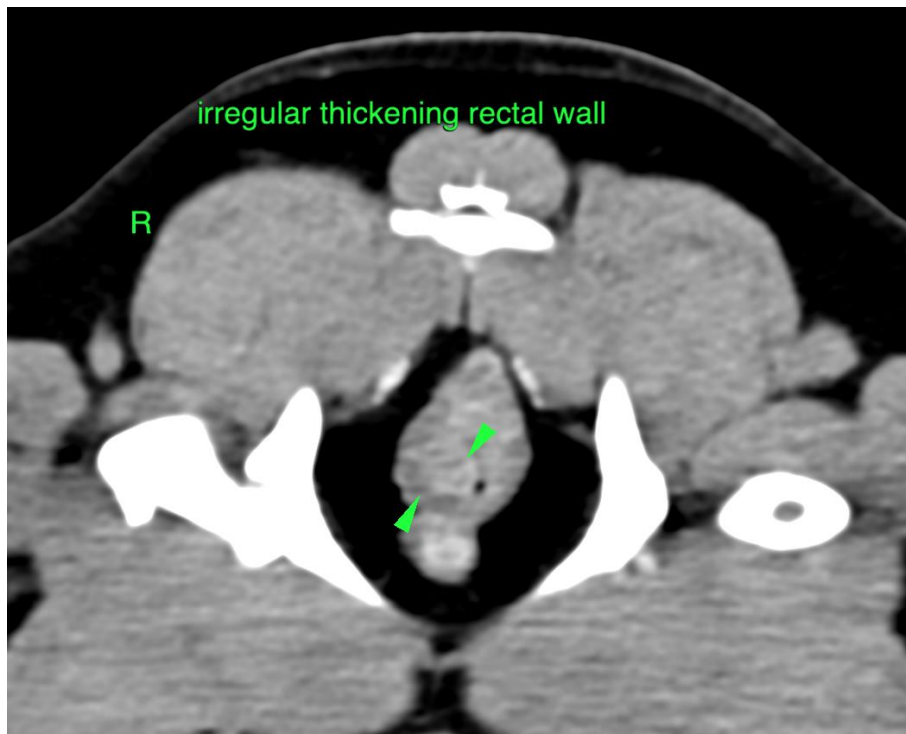
Westgarth

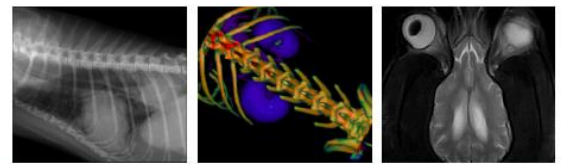
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PATIENT

Oliver Attard

SPECIES

Canine

BREED

Yorkie X

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PATIENT

Oliver Attard

SPECIES

Canine

BREED

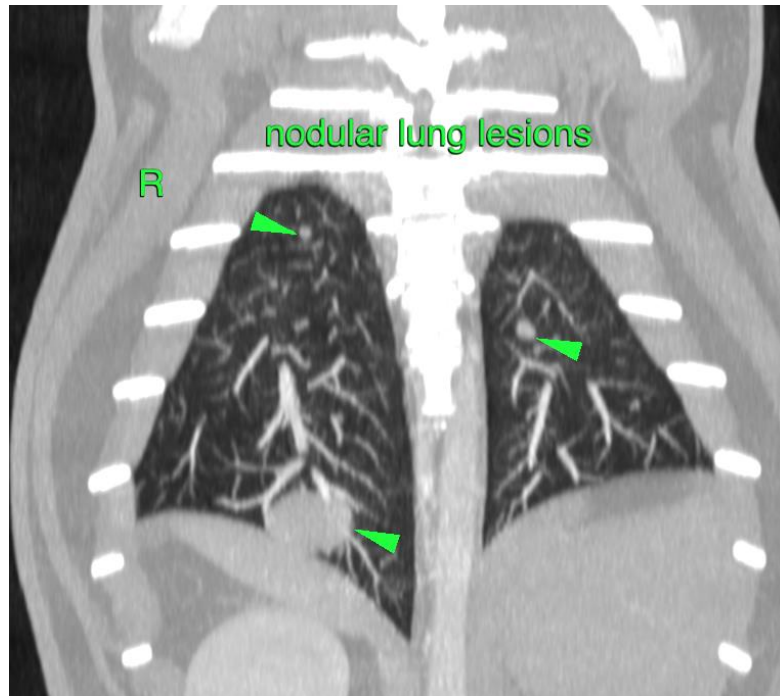
Yorkie X

SEX

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AGE

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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.

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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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