



PATIENT PRESENTING CLINICAL SIGNS

Quinn Sellin Swelling/mass noted starting on nasal planum in Sept 2021. 4 masses removed at primary vet on May 26, 2022: L lat. thigh (skin tag on report); R lat front leg (lipoma on diagnostic report); dorsal spine and dorsal nasal planum. Results from veterinary diagnostic lab: dorsal spine had low mitotic rate cutaneous melanoma with complete excision and nasal planum mass was found to be melanoma with higher mitotic rate and marginal excision. O is planning on pursuing chemotherapy and requested a CT to check for metastasis. CBC & Chemistry profile within normal limits today.

SPECIES

Canine

BREED

Vizsla

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A high resolution post-contrast CT study of the thorax and abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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

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.

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

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

Abdomen

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

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.

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

In the lateroventral aspect of the left lateral liver lobe, an irregular roundish post contrast heterogeneous mild hypoattenuating parenchymal lesion is visible, measuring 12 mm in diameter. The remainder of the hepatic parenchymal are uniform soft tissue attenuating and contrast enhancing.

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

SEX

FS

AGE

9 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Casselton Vet Service

REFERRING VET

Laurie Huckle

INVOICE

52643

DATE

6-29-22



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

The bony and surrounding soft tissue structures reveal no abnormalities - the most dorsal aspects of the thoracic & lumbar spine are cropped by the field of view.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Small intraparenchymal heterogeneous contrast enhancing hepatic lesion left lateral liver lobe
- Structural normal thorax, no evidence of pulmonary metastatic disease

BREED

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The small roundish heterogeneous contrast enhancing zone in the lateroventral aspect of the left lateral liver lobe is most suggestive for regeneration nodular/nodular hyperplasia, hepatic cyst or hepatitis. The odds for neoplastic infiltration are considered low - Ultrasound guided FNA sampling can be used as advanced minimally invasive diagnostic tool.

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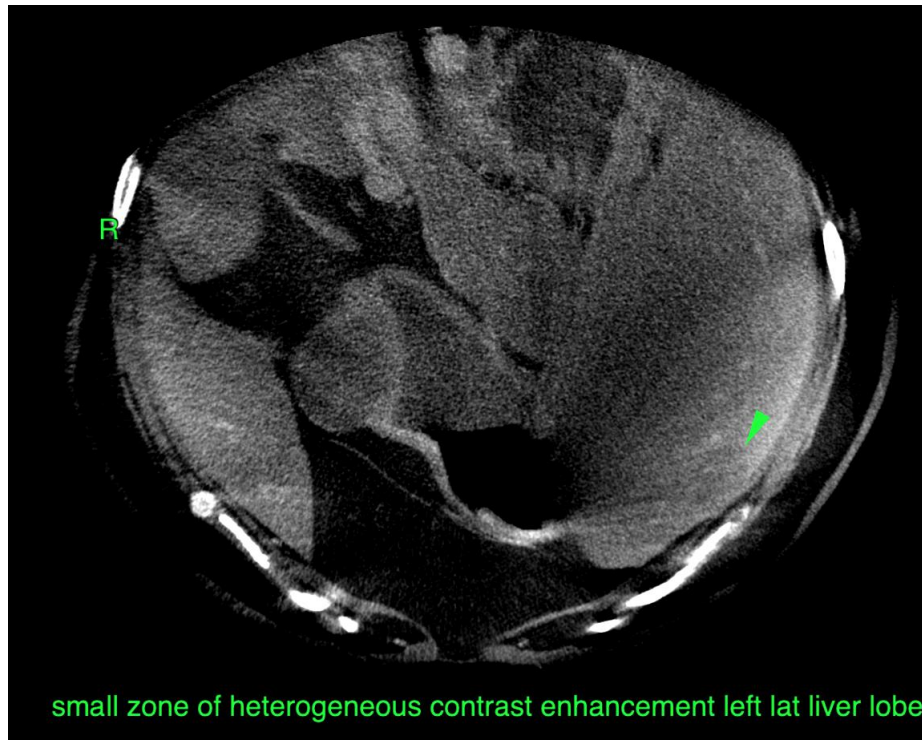
Laurie Huckle

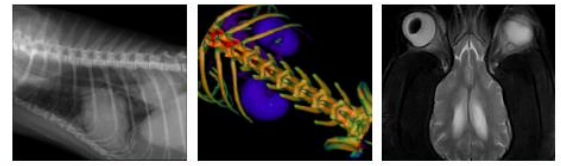
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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