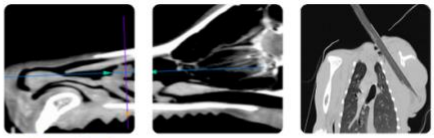

PATIENT

Rubi Pena

SPECIES

Canine

BREED

Terrier Mix

SEX

Spayed Female

AGE

8

WEIGHT

5.3 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Alejandra A.

HOSPITAL NAME

CARE Surgery Center

REFERRING VET

Dr. Samantha Parkinson

INVOICE

16400

DATE

06/05/26

PRESENTING CLINICAL SIGNS

Early May, Rubi ingested part of a shirt and a small, sharp baby toy. This was followed by an episode of vomiting and diarrhea with some blood in the stool. The diarrhea was described as frequent, small, soft stools. The foreign objects were never confirmed to have passed, and no surgery was performed. The gastrointestinal signs resolved. During this workup at Rubi's primary care, an abdominal ultrasound was performed, which revealed the incidental findings of adrenal gland changes and a lesion in the colon. Rubi presented today 06/04/2026 for a colonoscopy and abdominal CT scan to evaluate the adrenal glands and the colon mass.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

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 left adrenal gland is within normal limits for size, shape and organ architecture. In the cranial pole of the right adrenal gland, a post contrast mild heterogeneous hyperattenuating nodule is appreciated, measuring up to 10 mm in diameter.

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

In the ventral aspect of the gallbladder, a gravity dependent, irregular shaped mineral attenuating calculus is seen.

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

The position, delineation and wall of the gastrointestinal tract are considered within normal limits throughout. The colon is generalized mild to moderately distended by unformed fecal material. The colonic wall is smooth and thin.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild nodular enlargement cranial pole right adrenal gland without vascular invasion
- Unformed fecal material in colon – without overt mural changes of the wall
- Cholecystolithiasis without mechanical obstruction

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mild nodular enlargement of the cranial pole of the right adrenal gland is most suggestive for (non)functional nodular hyperplasia or less likely primary adrenal neoplastic transformation (e.g. adenoma, adenocarcinoma, pheochromocytoma). A follow up examination – ultrasound or CT – in 3-6 month may be used to screen if the nodule is increasing in size.

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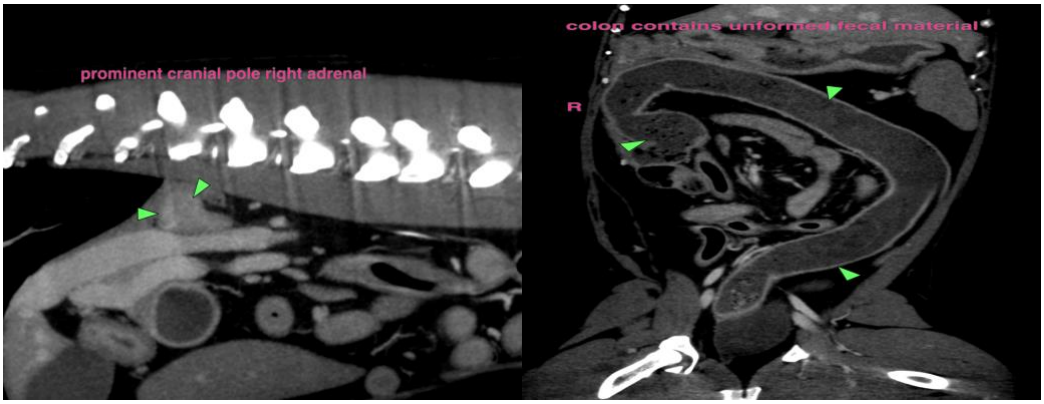

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, DVM, Dr. med. vet. DipECVDI
info@sonopath.com