



**PATIENT PRESENTING CLINICAL SIGNS**

Lottie Boyds History: Swollen left hind, lymphatic drainage problem? causing pitting odema, mammary mass LHS caudal abdo, quite bright improvement on Peds  
Abnormal PE/Chem/CBC/UA Results: NAD

**SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN**

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

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

Springer Spaniel **Thorax**

**SEX** The periarticular bones of the left shoulder joint present moderate osteophyte new bone formation. 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.  
Male

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

11 Years 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.

**INTERPRETED BY** The lung parenchyma presents the expected architecture and attenuation behavior.

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**

**HOSPITAL NAME** The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.  
Myerscough VG

**REFERRING VET** The abdominal aorta is prominent and has a mild undulating course. The left femoral vein appears distended and presents decreased contrast filling.

Dr. Rosalind McKenzie 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.

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

16482 Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**DATE**

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

Lottie Boyds

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

**SPECIES**

Canine

The left flank presents moderate subcutaneous swelling and fat-stranding of the subcutaneous fat. The caudal mammary complex are swollen, L>R, and the left inguinal lymph node is prominent.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**BREED**

Springer Spaniel

- History of edematous swelling left hind limb & left flank
- Possible thrombosis of the left femoral vein.
- Enlarged caudal mammary complexes, L>R
- Lymphadenopathy left inguinal lymph node
- Degenerative osteoarthritis left shoulder joint
- Prominent abdominal aorta
- No evidence of pulmonary metastatic disease

**SEX**

Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

11 Years

Thrombosis of the left femoral vein can be a plausible source for the presenting clinical signs. Recommend ultrasound examination of the large vessels of the left hind limb to rule in/out the diagnosis. The prominent aorta can present a normal anatomical variant and is unlikely to be associated with clinical signs, however as contrast filling is limited, ultrasound might be used to rule out thrombus material in the aortic trifurcation, femoral artery.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

Other potentials for edematous swelling can include vasculitis, hypalbuminemia, allergic reaction/bug bite, vascular malformation.

**HOSPITAL NAME**

Myerscough VG

The nodular enlargement of the caudal mammary complexes is concerning for neoplastic transformation (e.g. carcinoma or mast-cell tumor). The prominent inguinal lymph node can be a sequela to resorptive hyperplasia due to edematous swelling of the left hind limb or indicate metastatic spread. If not done so yet, recommend FNA sampling of the prominent inguinal lymph node ± mammary masses.

**REFERRING VET**

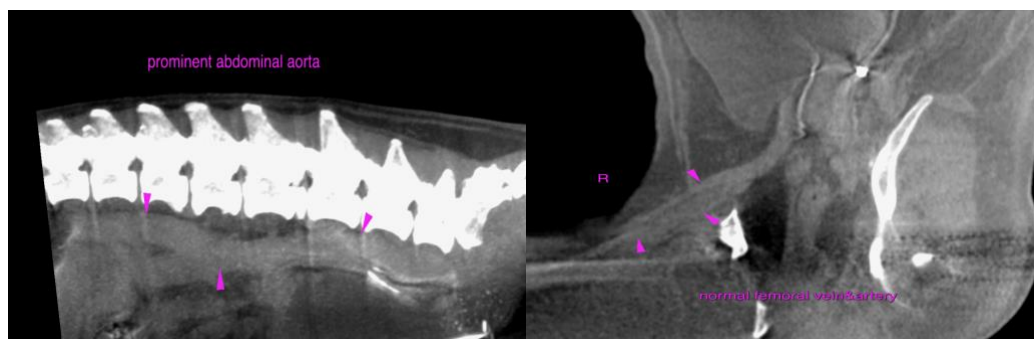
Dr. Rosalind  
McKenzie

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**PATIENT**

Lottie Boyds

**SPECIES**

Canine

**BREED**

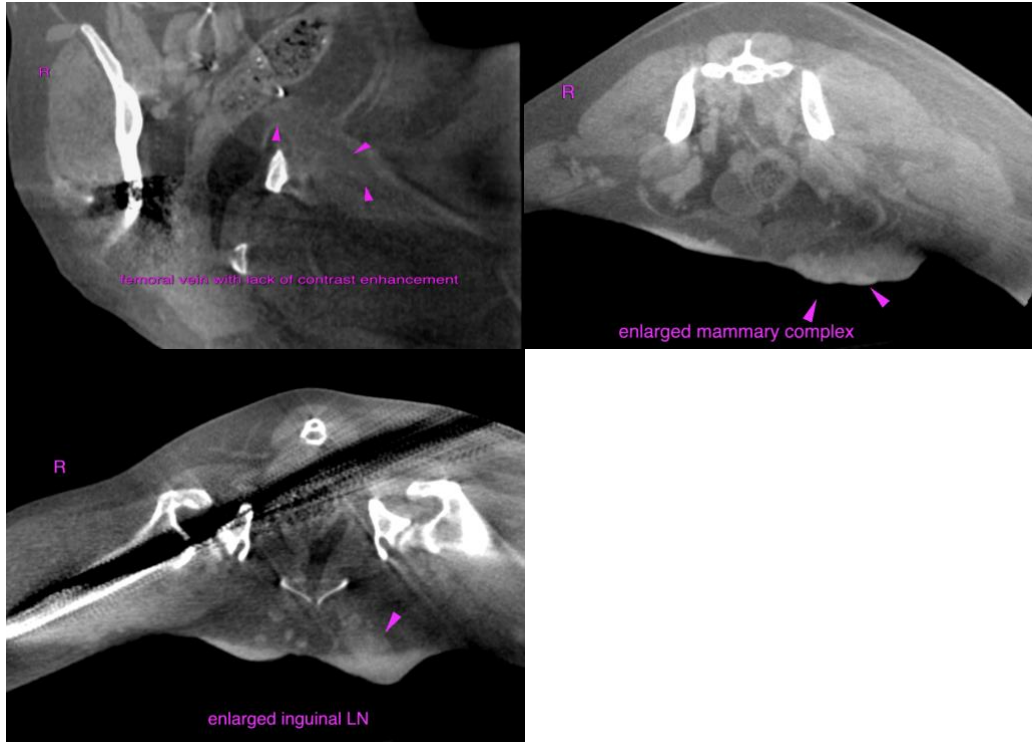
Springer Spaniel

**SEX**

Male

**AGE**

11 Years



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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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.

**HOSPITAL NAME**

Myerscough VG

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

**REFERRING VET**

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McKenzie

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