



**PATIENT PRESENTING CLINICAL SIGNS**

**Lilly Gavish** Chronic coughing. Concern for pulmonary mass on radiographs. Patient coughed up a 3/4 cm flat, red, fleshy tissue sample that was submitted for pathology: possible bronchiolar neoplasia  
**SPECIES** Abnormal PE/Chem/CBC/UA Results: Minimal to mild hepatic enlargement. Mottled spleen and regional areas of nodular changes within the liver (2cm x 2.25cm) were noted. Also noted small amount of gall bladder debris and intestinal wall measurements on high end of normal for thickness.  
**Canine** No obvious lymphadenopathy or free fluid seen.

**COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

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

**Golden Retriever COMPUTED TOMOGRAPHIC FINDINGS**

Thorax

**SEX** Multifocal moderate spondylosis formation is seen along the thoracic spine.

**Spayed Female** 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.

**12 Years, 7 Months** In the hilar region of the right caudal lung lobe, a multilobulated, uniform soft tissue attenuating and contrast enhancing mass is visible, measuring 4.8 x 3.5 x 3.7 cm in size. The mass is compressing and invading the hilar bronchus of the right caudal& accessory lung lobe and compressing the first degree bronchus of the right middle lung lobe. The caudodorsal aspect of the left caudal lung lobe presents a zone with compression atelectasis.

**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.

**HOSPITAL NAME**

Abdomen

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

**REFERRING VET**

Meaux

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.

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

The hepatic volume is moderately increased the liver is protruding beyond the costal arch; the gastric axis is deviated caudally. The caudoventral hepatic margins are rounded. The hepatic parenchyma is uniform soft tissue attenuating and contrast enhancing.

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



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

Lilly Gavish Along the lumbar spine, multifocal moderate spondylosis formation is present. Both coxofemoral joints present moderate to marked osteophyte new bone formation. The acetabular groove bilaterally is shallow, and the center of the femoral heads is lateral to the dorsal acetabular rim.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Pulmonary mass hilar region right caudal lung lobe with bronchial invasion
- Mild to moderate hepatomegaly
- Degenerative osteoarthritis coxofemoral joints bilaterally due to hip dysplasia
- Spondylosis deformans

**BREED**

Golden Retriever

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

Spayed Female

The CT study is confirming the diagnosis of pulmonary mass, originating from the hilar region of the right caudal lung lobe – invading the first degree bronchus of the right caudal lung lobe at the same level – bronchogenic carcinoma is considered as the top differential here. As the mass is located in the hilar region of the right caudal lung lobe and there is no clear delineation from the hilar region of the right middle lung lobe the mass might involve the right middle lung lobe as well. If surgery is still a consideration, excision of the pulmonary mass may warrant right sided pneumectomy or may not be possible at all.

**AGE**

12 Years, 7 Months

Potentials for the hepatomegaly include metabolic hepatic disease, hepatitis or diffuse neoplastic infiltration. In case of doubt, ultrasound guided FNA sampling and/or Tru-cut biopsy can be used as minimally invasive methods for further workup.

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**HOSPITAL NAME**

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**REFERRING VET**

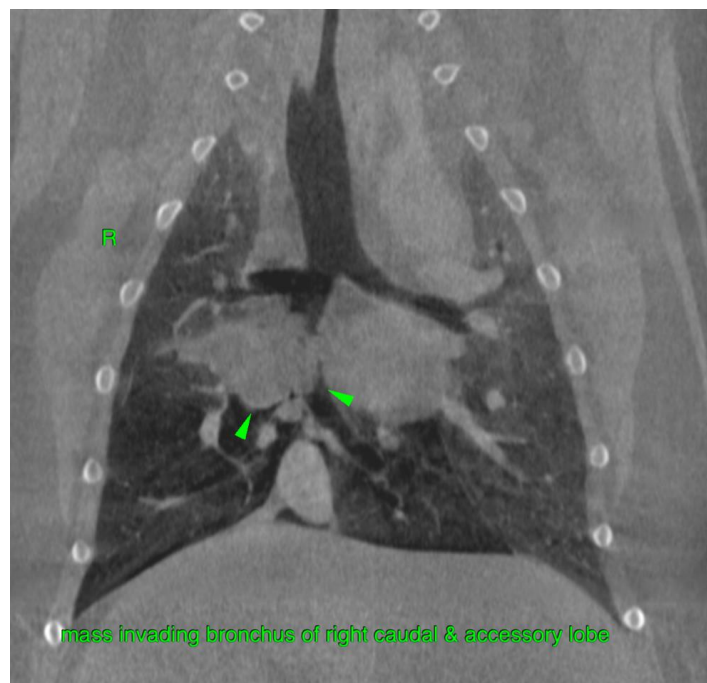
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**PATIENT**

Lilly Gavish

**SPECIES**

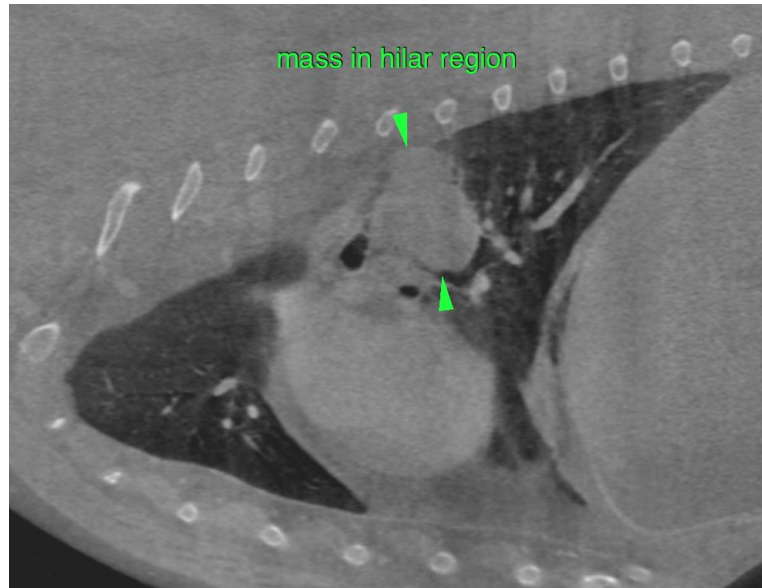
Canine

**BREED**

Golden Retriever

**SEX**

Spayed Female



**AGE**

12 Years, 7 Months

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  
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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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**HOSPITAL NAME**

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