



PATIENT PRESENTING CLINICAL SIGNS

Patti Meyers Left mammary chain removal-pre screening met check

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

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

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED Thorax

Jack Russell The axillary lymph nodes bilaterally are prominent, L>R. In the subcutaneous tissue caudal to the axillary region bilaterally, well-defined nodular soft tissue attenuating lesions are seen, measuring up to 10 mm in diameter – suspect enlarged accessory axillary lymph nodes.

SEX The intervertebral disc space C7/T1 is moderately narrowed and shows a central vacuum phenomenon; the respective vertebral endplates present moderate spondylosis formation.

Female Spayed

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform and considered within normal limits.

AGE

10 Years, 11 Months

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Multifocal throughout the lung parenchyma, randomly distributed, well-defined, soft tissue attenuating nodules, measuring up to 2.7 mm in diameter are visible.

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.

Both kidneys present moderate irregular margins with concave depressions of the surface. After contrast administration, the right renal cortex presents with multiple small (< 1mm) parenchymal filling defects.

REFERRING VET

Dr. Joseph D'Abbraccio

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 a heterogeneous contrast enhancement pattern of the parenchyma with multiple roundish hyperattenuating parenchymal lesions, unremarkable.

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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 left lateral liver lobe presents with a hypoattenuating ovoidal intraparenchymal lesion, causing mild convex bulging of the hepatic capsule at the same level, measuring 2.5 x 1.4 x 2.2 cm in size.

DATE

7-26-22

A moderate amount of mineral attenuating material is attached to the mucosal lining of the gallbladder bilaterally.



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

Level with the cardia of the stomach, an intramural, ovoid shaped, soft tissue attenuating and to the muscular layer isoattenuating nodule is visible, measuring 12 x 8 x 14 mm in size.

SPECIES

Canine

The lymph nodes of the hypogastric lymph center are generalized mild to moderately enlarged and rounded and present a post contrast mild hypoattenuating center.

The caudal three left mammary complexed are prominent and present a heterogeneous contrast enhancement pattern with ill-defined intraparenchymal small mass lesions. Along the right mammary complexes, multiple small (< 7 mm), nodular lesions are appreciated.

BREED

Jack Russell

The inguinal lymph nodes bilaterally are irregularly enlarged and present a heterogeneous contrast enhancement pattern.

SEX

Female Spayed

Multifocal spondylosis formation is seen along the lumbar spine.

The right femoral head is has an irregular flattened shape. The periarticular bones of het right coxofemoral joint present mild to moderate osteophyte new bone formation.

The patella of both stifle joints is located at the craniomedial aspect of the medial femoral condyle.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

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- History of mammary neoplasia with mammary nodules bilaterally, L>>R
- Lymphadenopathy inguinal lymph node, hypogastric lymph nodes and axillary lymph nodes bilaterally
- Structured nodular interstitial lung pattern
- Solitary intraparenchymal hepatic mass
- Intramural nodular lesion region of cardia of the stomach
- Bilateral chronic nephropathy and small renal cysts
- Moderate biliary sludge
- Misshapen left femoral head – possible state post Legg-Calve-Perthes disease
- Bilateral medial patellar luxation
- Chronic discopathy C7/T1
- Spondylosis deformans

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is fitting the history of mammary carcinoma with nodular lesions in the mammary chain bilaterally, L>>R. The lymphadenopathy of the tributary lymph nodes and the nodular lung pattern are compatible with metastatic spread (carcinomatosis).

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The solitary hepatic lesion is not specific, and potentials include regeneration nodule/nodular hyperplasia or neoplastic transformation (metastasis versus primary hepatic neoplasia). Ultrasound guided FNA sampling can be used as advanced minimally invasive diagnostic tool.

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The intramural gastric nodule is suggestive for leiomyoma or leiomyosarcoma, the clinical relevance is questionable at this point.



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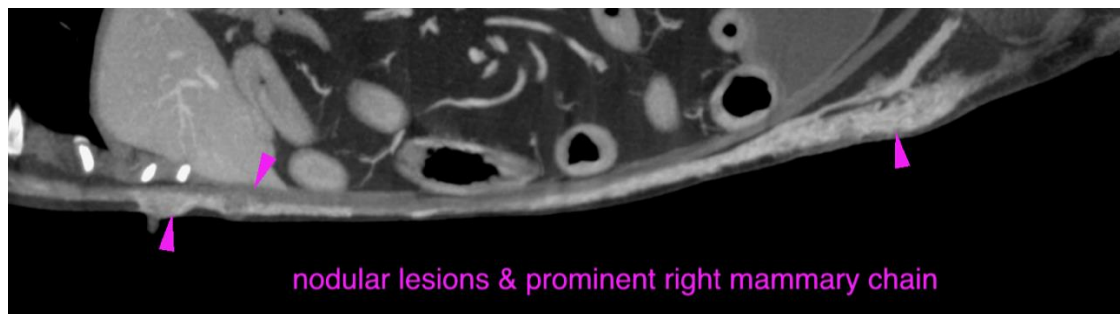
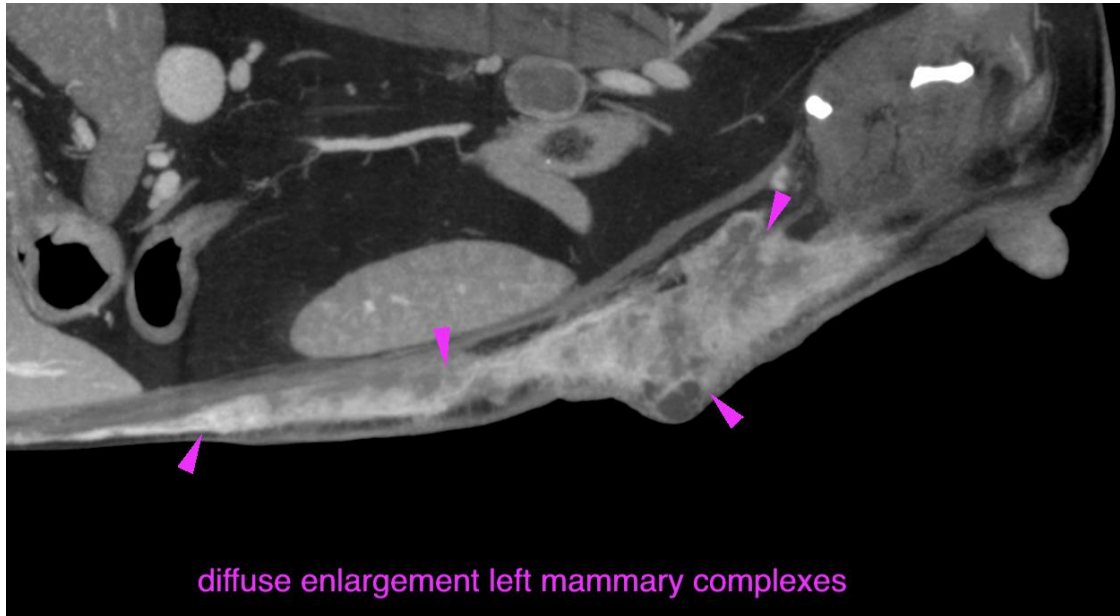
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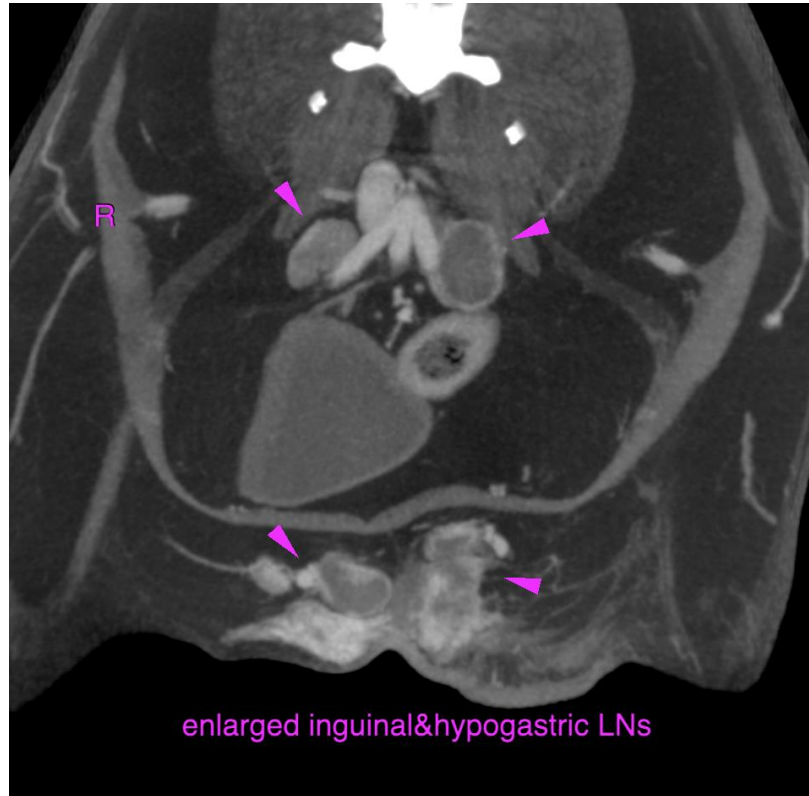
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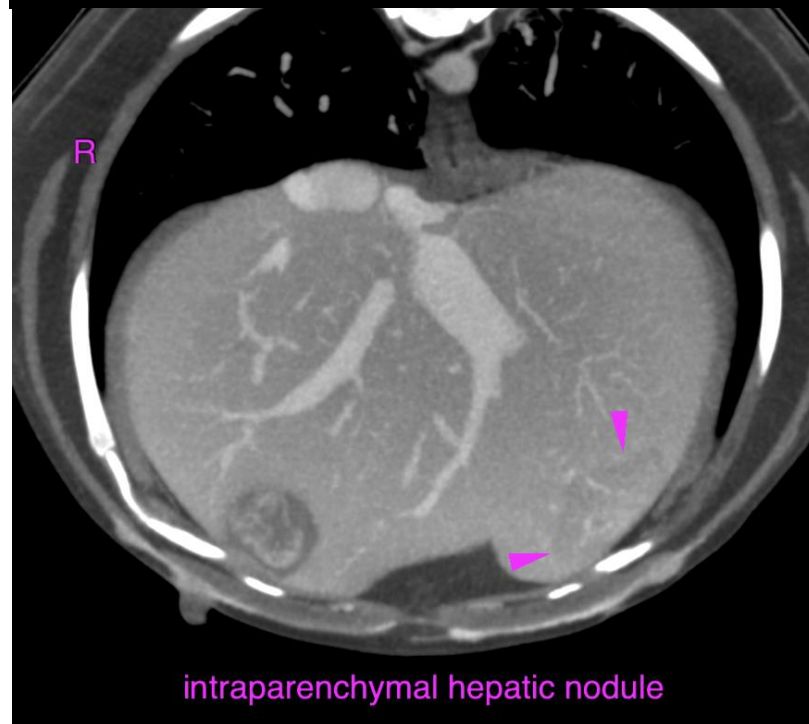
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enlarged inguinal&hypogastric LNs



intraparenchymal hepatic nodule



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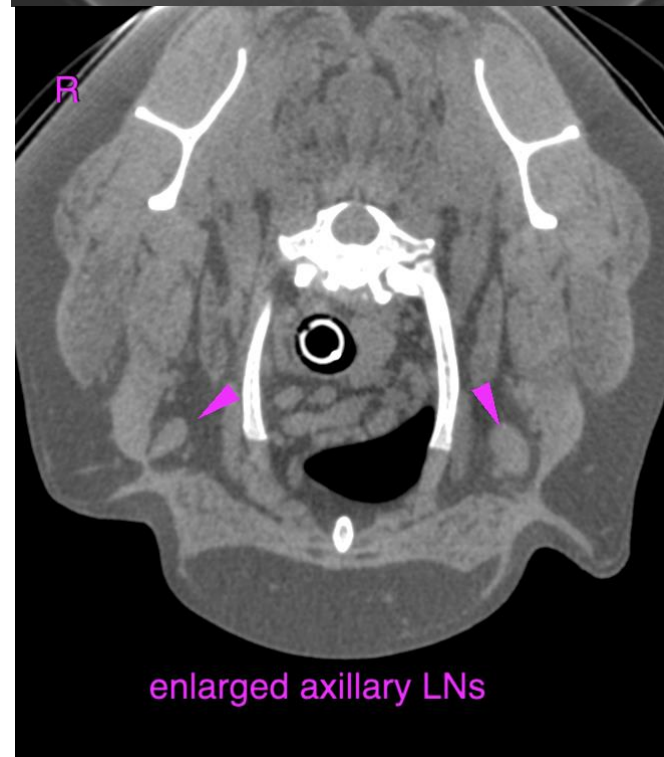
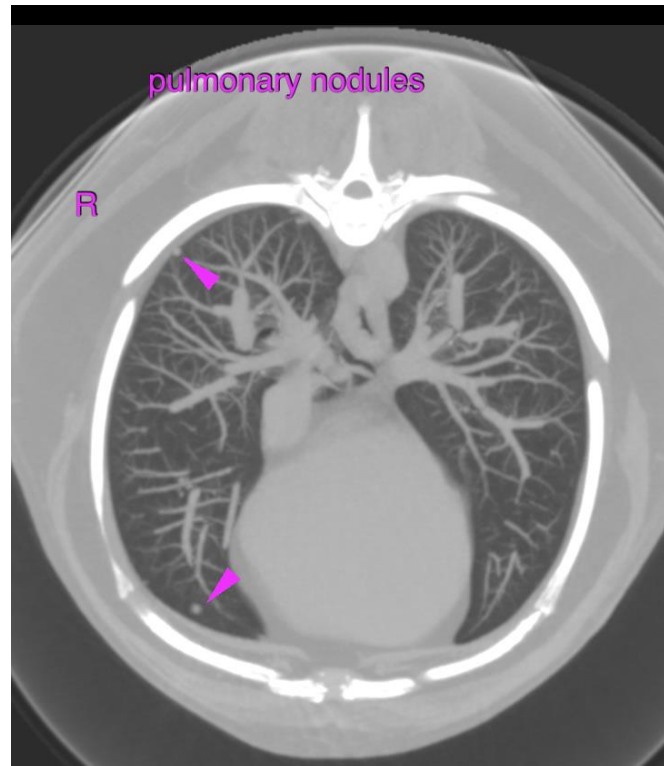
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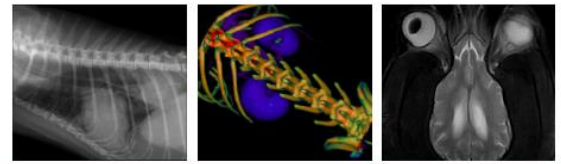
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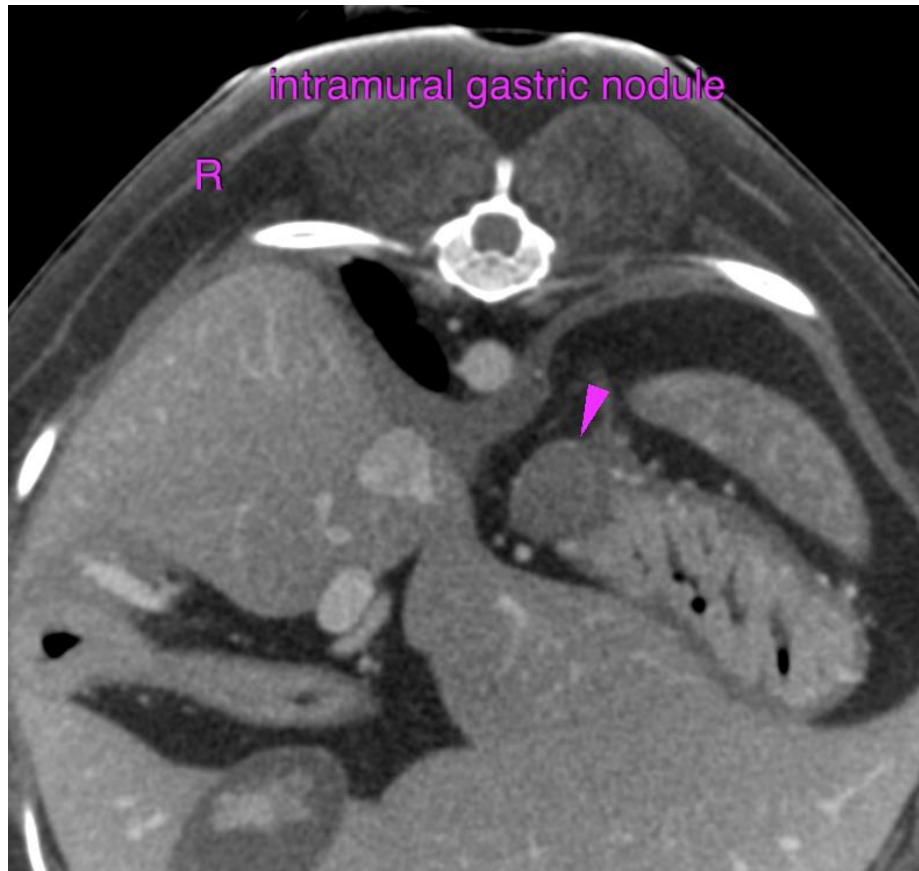
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intramural gastric nodule

R

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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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