
**PATIENT PRESENTING CLINICAL SIGNS**

Holly Evans Has previously had issues with excessively licking of paws. Owner seems to think the excessive licking coincided with the owner's sister being in hospital for 10 weeks. Overnight excessively licking and owner found blood over her from a punctured gum from canine tooth. Has also had issues with

**SPECIES** gastritis/pancreatitis in the past - essentially chronic vomiting. Owner says often eats grass + vomits - is still systemically well otherwise. Previous blood tests have been relatively normal Recently had a dental procedure 2 weeks ago to remove a broken tooth and pre - anesthetic bloods were normal.

Canine

Owner is concerned she might be painful or worse have an underlying disease. She is particularly concerned about neoplasia undetected. Ct scan performed to rule out any underlying pathology that could be causing the chronic intermittent vomiting and bouts of excessive licking.

**BREED**

Boxer

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

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

**SEX**

Female

**COMPUTED TOMOGRAPHIC FINDINGS**
Thorax

Multifocal spondylosis formation is seen along the thoracic and lumbar spine, multiple facet joints along the lumbar spine present osteophyte new bone formation. Mild multifocal peripheral mineralization of the dural tube is present.

11

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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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.

**HOSPITAL NAME**

Colyton VH

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

**REFERRING VET**

Dr. Chris Papantonio

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis. The hypogastric lymph nodes are small.

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**

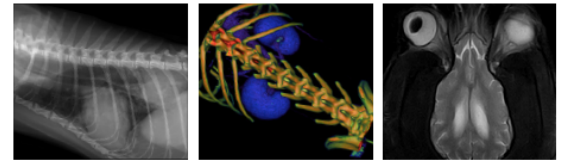
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Nodular enlargement of the cranial pole of the left adrenal gland is appreciated, measuring 19 mm in diameter and presenting a mild heterogeneous contrast enhancement pattern.

**DATE**

7/27/23

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



**PATIENT** In the parenchyma of the right lateral liver lobe, a small (< 8 mm), parenchymal filling defect is appreciated. The remainder of the hepatic parenchyma are uniform soft tissue attenuating and contrast enhancing.  
 Holly Evans

The common bile duct is dilated, measuring 4.7 mm in diameter.

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

**BREED** The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout. Originating from the left anal sac, a uniform soft tissue attenuating and uniform moderate contrast enhancing, well-defined, roundish mass is seen, measuring 2.5 x 2.1 x 2.6 cm.  
 Boxer The periarticular bones of both coxofemoral joints present mild osteophyte new bone formation.

### COMPUTED TOMOGRAPHIC DIAGNOSIS

**SEX** Female

- Soft tissue mass left anal sac
- Nodular enlargement cranial pole left adrenal gland, no evidence of vascular invasion
- Simple hepatic cyst, right lateral liver lobe
- Dilation of the common bile duct without signs of mechanical obstruction

**AGE** 11

- Mild degenerative osteoarthritis coxofemoral joints bilaterally
- Spondylosis deformans & serial spondylarthrosis
- Dural mineralization
- No evidence of pulmonary metastatic disease

### INTERPRETED BY INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sebastian Schaub, DVM Dr. med. vet. DipECVDI  
 The appreciated mass originating from the left anal sac is highly suggestive for anal sac adenocarcinoma; the CT study presents no signs of metastatic disease to the regional lymph nodes. Surgical management is considered as the therapy of choice.

**HOSPITAL NAME** Colyton VH  
 The nodular enlargement of the left adrenal gland can present (non)functional macronodular hyperplasia or neoplastic transformation (e.g. adenoma, adenocarcinoma, pheochromocytoma). Testing of the pituitary adrenal axis can be used as advanced diagnostic test.

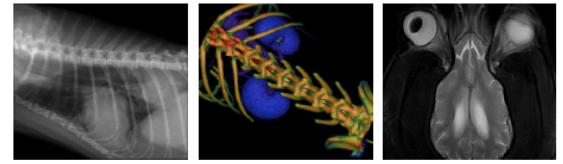
**REFERRING VET** Dr. Chris Papantonio  
 The spine presents without signs of compressive myelopathy, but multiple degenerative changes. An underlying cause for the vomiting and possible nausea is not appreciated. If not done so yet recommend complete blood work including cpl to rule out (chronic) pancreatitis.

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**PATIENT**

Holly Evans

**SPECIES**

Canine

**BREED**

Boxer

**SEX**

Female

**AGE**

11

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DVM Dr. med. vet.  
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**HOSPITAL NAME**

Colyton VH

**REFERRING VET**

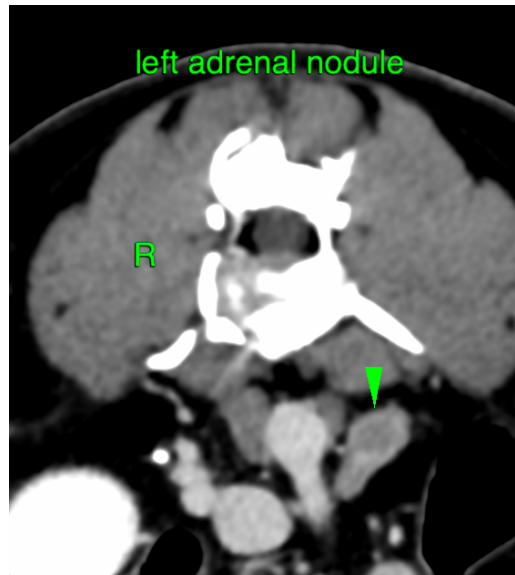
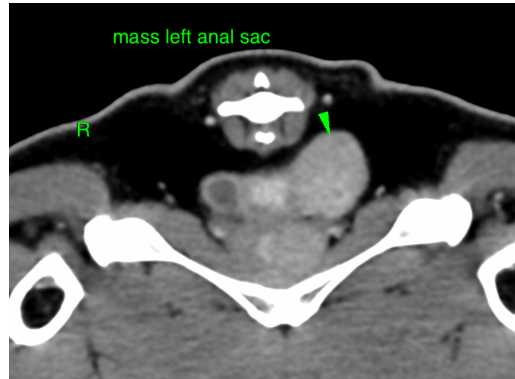
Dr. Chris Papantonio

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com