



**PATIENT PRESENTING CLINICAL SIGNS**

Julie Foster firm 2cmx1.5cmx1cm pedunculated intra-oral mass on left buccal membrane 2cm from lateral commissure of mouth. The mass was initially noticed early June 2022 when Julie was panting; the mass was pea-sized then. Then the mass grew to about 3 cm x 4 cm, but part of the mass fell off when Julie chewed on it. The mass became infected and Julie was started on clavaseptin; medications completed and infection resolved. No growth noted since then. Mass does not seem to cause discomfort or pain. Julie was seen by Greenwood Animal Hospital and incisional biopsy was performed July 19/22. Histopathology revealed spindle cell malignancy.

**SPECIES**

Canine

**BREED**

German Shepherd

**COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

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

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

FS

Thorax

Both shoulder joints present moderate osteophyte new bone formation. Multiple small lipomas are seen in the subcutaneous tissue along the thoracic wall.

**AGE**

12 Years

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.

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Animal Health  
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The lung parenchyma presents the expected architecture and attenuation behavior with randomly distributed interspersed punctuate mineralization. In the left caudal lung lobe, a well-defined, gas filled roundish lesion is seen, demarcated by a mild irregular but thin soft tissue membrane.

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

**REFERRING VET**

Dr. Debbie Reynolds

Abdomen

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

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Both kidneys present mild irregular margins. Mild punctuate mineralization of the parenchyma of the right kidney is appreciated. 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.

**DATE**

8-10-22

The liver presents with normal shape, even surface. The left lateral liver lobe presents with a small intraparenchymal filling defect, measuring 5 mm in diameter. Post contrast administration, a in the early phase heterogeneous zone is seen in the right lateral liver lobe – not appreciated in the delayed venous phase.



**PATIENT**

Julie Foster

The splenic parenchyma presents with multiple, mild hypoattenuating intraparenchymal nodular lesions, measuring up to 17 mm in diameter – one lesion is mildly protruding beyond the surface of the caudal extremity of the spleen.

In the gallbladder two mineral attenuating calculi are appreciated.

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

In the pyloric antrum of the stomach, two geometric shaped, flat, mineral attenuating bodies are appreciated, measuring up to 3 cm in diameter. The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

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German Shepherd

Both coxofemoral joints present mild osteophyte new bone formation.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**SEX**

FS

- Gastric foreign material – suspect pieces of plastic
- Small splenic parenchymal nodular lesions
- In early post contrast phase heterogeneous contrast enhancing area right lateral liver lobe
- Solitary hepatic cyst
- Mild chronic nephropathy
- Cholecystolithiasis without evidence of obstruction
- Bulla left caudal lung lobe
- Pulmonary osteomas
- Mild degenerative osteoarthritis shoulder & coxofemoral joints
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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Animal Health  
Partners

The heterogeneous contrast enhancing region of the right lateral liver lobe is most consistent with benign regeneration nodule/nodular hyperplasia.

The odds for nodular hyperplasia of the spleen are considered high as well.

**REFERRING VET**

Dr. Debbie Reynolds

To rule out malignant infiltration, ultrasound guided FNA sampling can be used as advanced minimally invasive diagnostic tool.

The gastric foreign material will likely pass the gastrointestinal tract uneventfully, however if vomiting develops recommend reevaluating the patient for mechanical obstruction.

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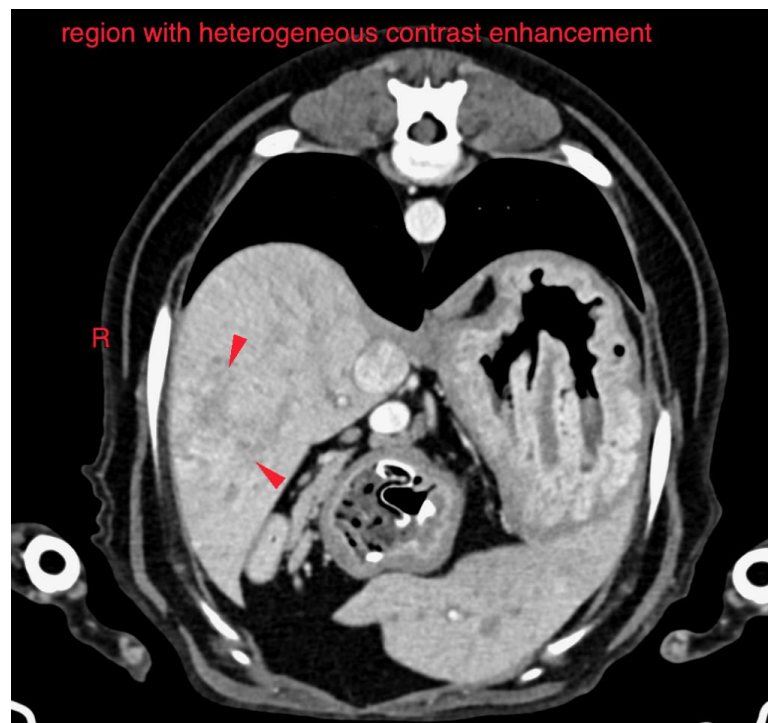
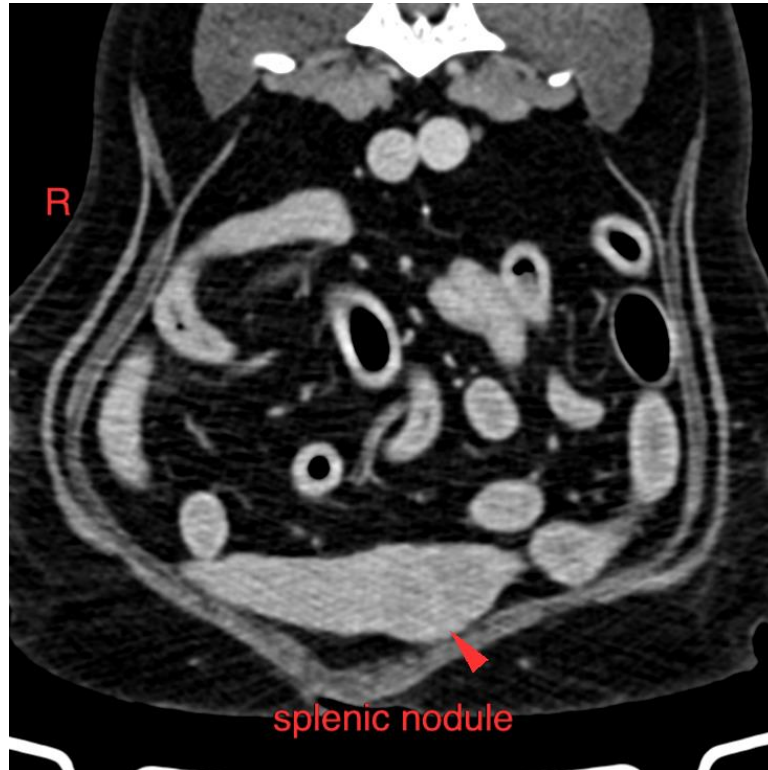
Dr. Debbie Reynolds

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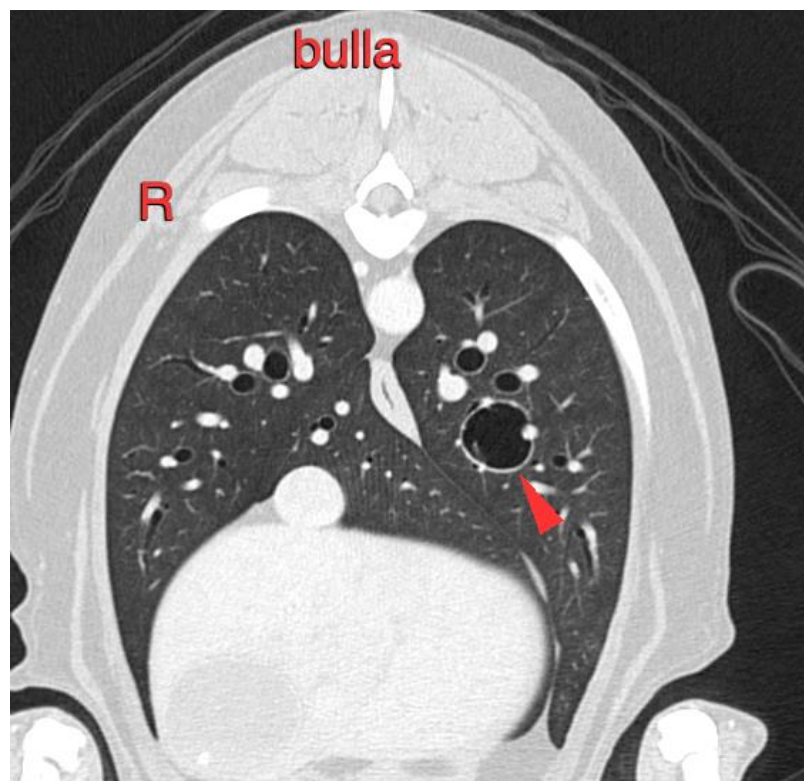
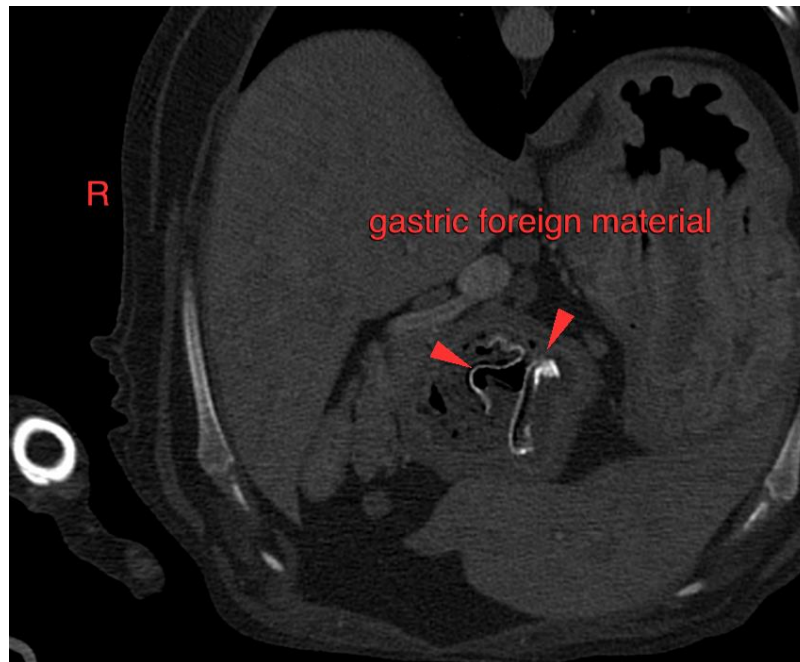
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**PATIENT**

Julie Foster

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.

**SPECIES**

Canine

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.

**BREED**

German Shepherd

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