



PATIENT PRESENTING CLINICAL SIGNS

Finn McDermott Acute abdominal pain w/ peri-renal fluid associated with right kidney and suspected mass of the renal vascular structures. Patient is also recently diagnosed diabetic. Cerenia, ondansetron, metronidazole, methadone, gabapentin, famotidine, insulin - all started 8/17/22

SPECIES Abnormal PE/Chem/CBC/UA Results:

Canine COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

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

BREED COMPUTED TOMOGRAPHIC FINDINGS

Coton De Tulear Thorax

SEX In the subcutaneous tissue along the right ventrolateral thoracic wall, caudally to the right axillary region, an ovoid shaped lipoma is appreciated.

MN 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 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 Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.
Dr. med. vet. DipECVDI

HOSPITAL NAME Abdomen
The right aspect of the retroperitoneal space presents moderate to marked fat-stranding of the retroperitoneal fat and a moderate amount of fluid attenuating material at the medial aspect of the right kidney- mildly extending to the left side.

REFERRING VET Post contrast administration, a heterogeneous contrast enhancing right adrenal mass is noted, measuring 1.8 x 1.8 x 3.1 cm in size. The ventral margins of the right adrenal mass are indistinct and merge with the surrounding non-contrast enhancing soft tissue material - 'sentinel clot'.

Borecky The left adrenal gland is within normal limits for size, shape and organ architecture.

INVOICE 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.

53579 The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

DATE 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.

8-18-22



PATIENT The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

Finn McDermott

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

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

Canine

The bony and surrounding soft tissue structures reveal no abnormalities.

BREED

COMPUTED TOMOGRAPHIC DIAGNOSIS

Coton De Tulear

- Right adrenal soft tissue mass with evidence of rupture, no signs for vascular invasion
- Moderate right sided retroperitoneal effusion
- Hepatomegaly
- Lipoma right lateroventral thoracic wall
- No evidence of pulmonary metastatic disease

SEX

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

12 Years

The CT study is consistent with ruptured right adrenal primary neoplasia – such as adenocarcinoma or pheochromocytoma – and secondary retroperitoneal hemorrhage. The finding is a plausible explanation for the presenting clinical signs and surgical intervention is advised.

Potentials for the hepatomegaly include metabolic hepatic disease, hepatitis or diffuse neoplastic infiltration.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Mobile Pet Imaging
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REFERRING VET

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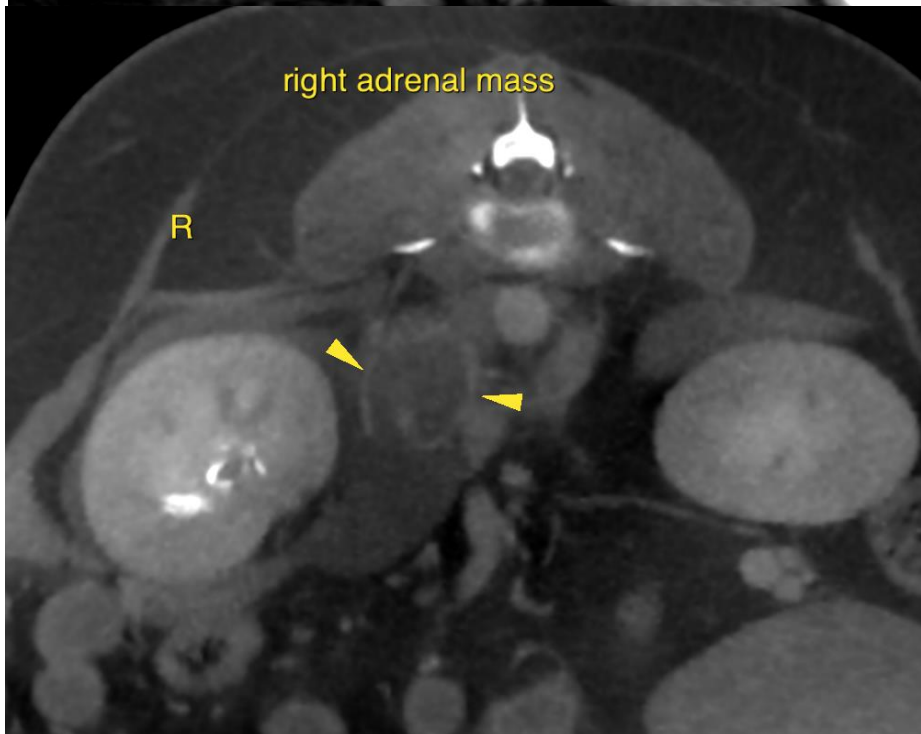
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SPECIES

Canine

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.

BREED

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