



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Merlin Hollinger
SPECIES Patient has a week history of inappetence and diarrhea with intermittent vomiting. Ultrasound found enlargement of lymph nodes and hypo-echogenicity in the mesentery near the ileo-colic junction. Cytology of the lymph nodes showed abnormal lymphocyte production suggestive of lymphoma. Concerns for CT are for assessment and surgical planning

Feline COMPUTED TOMOGRAPHY OF THE ABDOMEN

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

BREED COMPUTED TOMOGRAPHIC FINDINGS

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

SEX Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration the left kidney presents a solitary parenchymal filling defect, measuring 3.0 mm in diameter.

Male Neutered The adrenal glands are within normal limits for size, shape and organ architecture.

AGE Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

7 Years 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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI
 The pancreatic duct is moderately dilated, measuring 2.2 mm in diameter. The common bile duct is prominent, measuring 1.9 mm in diameter.

The outer layer of the wall of the small intestinal tract is prominent, but the normal width of the wall of the intestinal tract is maintained (<2 mm).

HOSPITAL NAME

The mesenteric lymph nodes are mildly prominent.

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The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

- Dr. Kerby
- Mild to moderate dilation of the pancreatic duct
 - Mild dilation of the common bile duct
 - Mild lymphadenopathy multiple mesenteric lymph nodes
 - Suspect mild prominent muscular layer small intestinal tract
 - Left sided renal cortical cyst

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

8-6-22

The dilation of the common bile duct and the pancreatic duct might be an age related finding or can indicate pancreatitis/cholangiohepatitis – there are no signs of obstruction. Correlate with findings from blood work, as pancreatitis, cholangiohepatitis, triaditis can be a source for the described clinical signs as well.

The diagnosis of lymphoma is not definitive, based on the computed tomographic changes of the mesenteric lymph nodes reactive hyperplasia needs to be considered as well.



PATIENT

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The prominent outer layer of the intestinal tract can be a sequela to chronic inflammation (e.g. lymphocytic plasmocytic, eosinophilic), hyperthyroidism, normal variant or diffuse neoplastic infiltration.

SPECIES

Feline

Repeating FNA sampling of the prominent mesenteric lymph nodes is considered beneficial. If results are equivocal, diagnostic celiotomy including biopsy of the prominent lymph nodes and full-thickness biopsy of the intestinal tract can be used as advanced diagnostic test.

BREED

Bengal

SEX

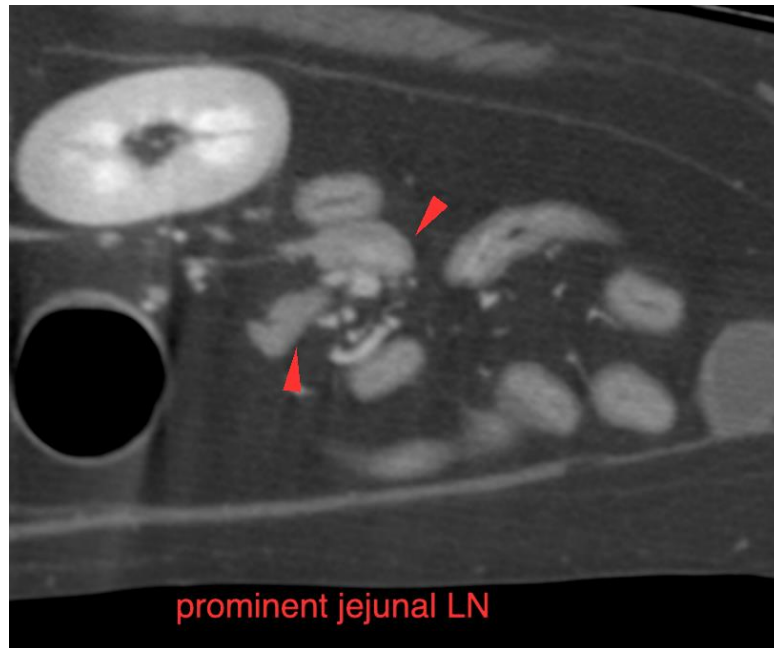
Male Neutered

AGE

7 Years

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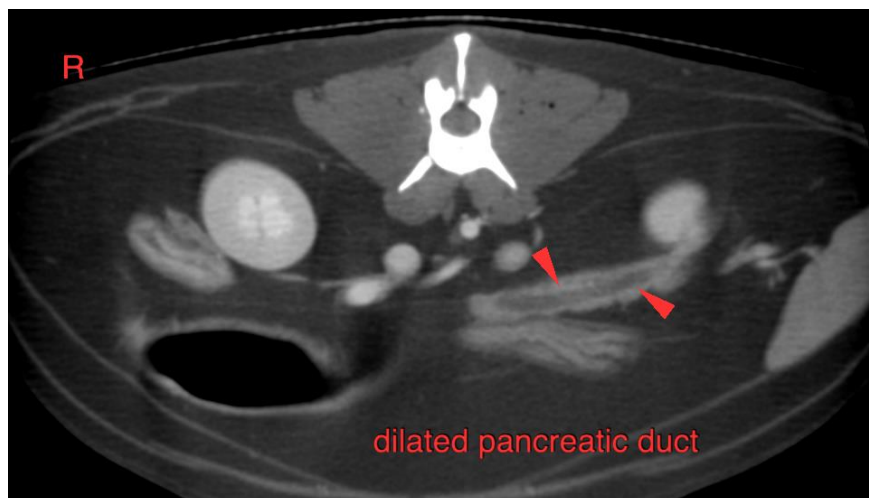


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Male Neutered

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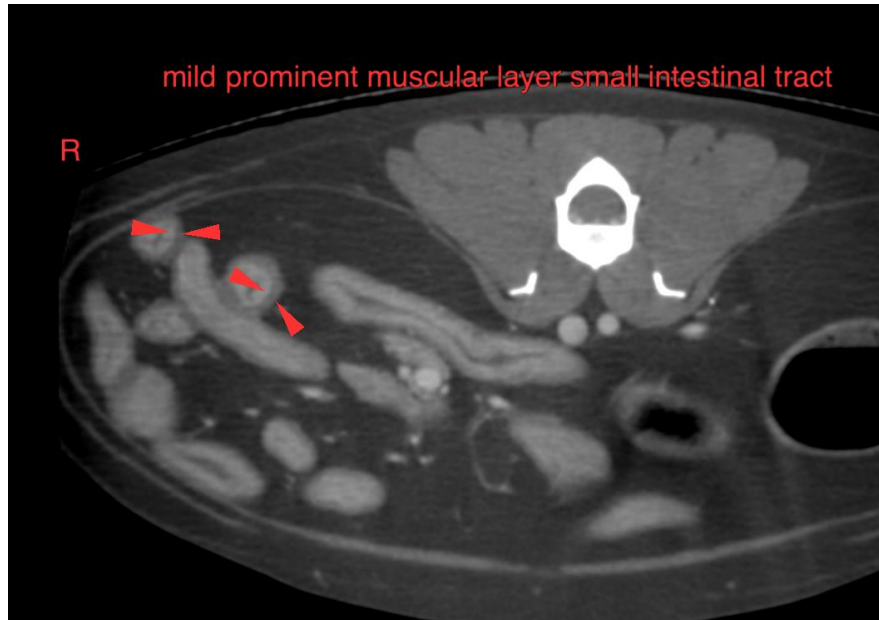
Dr. Kerby

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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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