



**PATIENT**

Sophie MacLeod

**PRESENTING CLINICAL SIGNS**

chronic blood in feces and a colorectal mass. The owners acquired her in September 2021 and noticed evidence of blood in her stools. The blood is described to be initially bright red/ frank in appearance, but starts to look darker. She has not been straining to defecate. A colorectal mass was palpated on rectal examination and a biopsy was performed (via digital rectal examination) revealing adenomatous polyp.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY 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 are provided for review.

**BREED**

Boxer

**COMPUTED TOMOGRAPHIC FINDINGS**

Thorax

**SEX**

The bony and surrounding soft tissue structures are within normal limits.

FS

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**

7 Years

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.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The lung parenchyma presents the expected architecture and attenuation behavior, but a small roundish ground glass attenuating subpleural lesion in the medial aspect of the left caudal lung lobe measuring 3.9 mm in diameter.<sup>2</sup>

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

Abdomen

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

**REFERRING VET**

Dr. Debbie Reynolds

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.

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

**INVOICE**

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

The hepatic size and shape are within normal limits. In the arterial post contrast phase within the parenchyma of the left lateral liver lobe a heterogeneous contrast enhancing roundish area is visible – not appreciated in the delayed post contrast phases.

**DATE**

8-6-22

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

The colonic lymph nodes and sacral lymph nodes are prominent. Starting level with the cranial



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aperture of the pelvic canal, an intraluminal moderate contrast enhancing mass is seen within the caudal part of the descending colon/cranial segment of the rectum, extending over a length of approximately 6.5 cm; the wall layering appears maintained.

The bony and surrounding soft tissue structures reveal no abnormalities.

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- Intraluminal soft tissue mass distal segment of descending colon/cranial segment of rectum
- Lymphadenopathy colonic lymph nodes
- In arterial phase heterogeneous contrast enhancing area left lateral liver lobe

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- Small zone with unstructured interstitial pattern left caudal lung lobe

**SEX**

FS

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

The CT study is fitting the history of potential adenomatous polyp originating from the colonic/rectal wall – possible the left wall. Transanal submucosal resection of the mass can be tried.

Reactive hyperplasia of the regional lymph nodes is likely, however malignant transformation of the colorectal mass should be ruled out by histopathological examination of the excised mass.

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The heterogeneous contrast enhancing zone of the left lateral liver lobe in the arterial phase is most consistent with benign nodular hyperplasia/regeneration nodule. The odds for malignant infiltration are considered low.

**INTERPRETED BY**

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Dr. med. vet. DipECVDI

The small zone of interstitial pattern of the left caudal lung lobe is suggestive for region of dystelectasis or focal pneumonitis, the clinical relevance is questionable.

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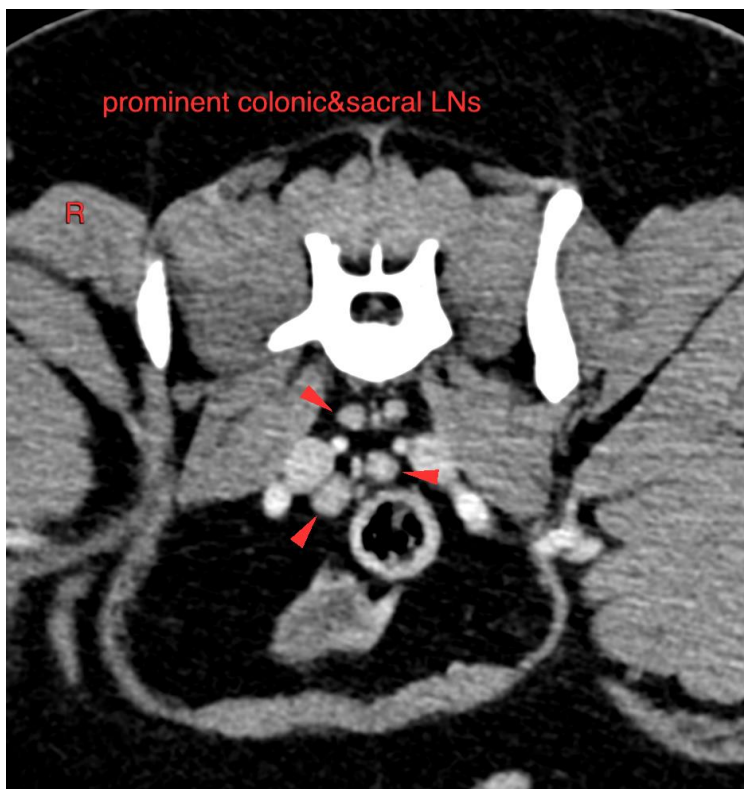
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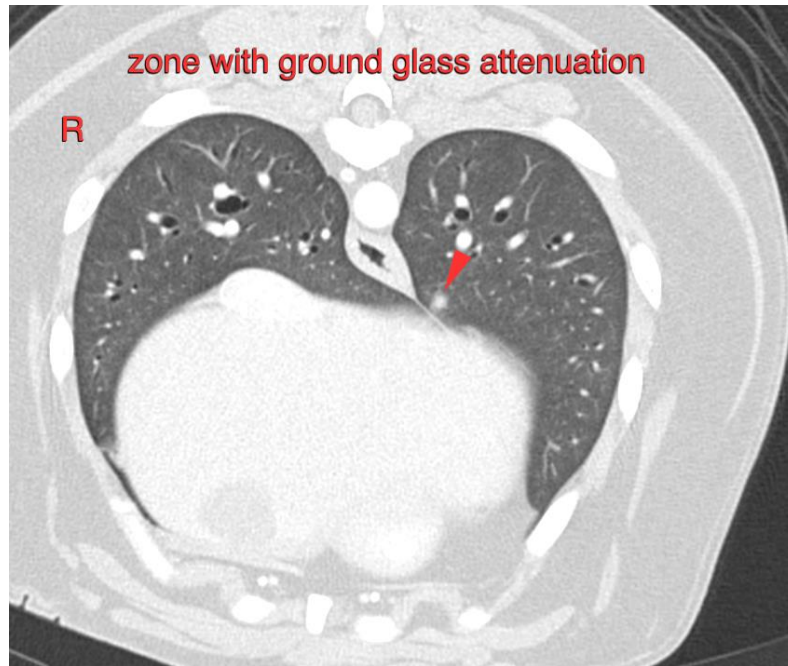
Boxer

**SEX**

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**AGE**

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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.

**HOSPITAL NAME**

Animal Health  
Partners

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