



PATIENT PRESENTING CLINICAL SIGNS

Cliste Hill
 Cliste presented as a referral for an abdominal u/s. Patient History: Clinical signs summary (Cliste presented today for a referral from Canadian Valley Animal Hospital for an abdominal U/S. P has been drinking more water than normal and losing weight. P has had diarrhea for 2 weeks (no blood or worms seen). eating fine. no vomiting seen. P is currently receiving prednisolone SID; none was given today. P is eating Hill's Science Diet z/d wet and dry food combined.) Physical Exam: Summary of PE findings (Patient is alert and responsive), T (102.6F/39.2C), P (104), R (80, panting), Patient attitude/demeanor (patient demeanor- bright) Diagnostics: Completed diagnostics (Running CBC, Chem and Elec. UA as well.) Additional Concerns: Sonographer's impressions (There is abnormal adrenal glands, left appears to be a mass and the right is either mass like or has a mass attached or beside the gland. There is visible pancreas, not really seeing inflamed tissue around pancreas.)

SPECIES
 Canine

BREED
 Retriever/Golden/Mix

SEX
 Spayed Female

AGE
 10 Years, 9 Months

ABDOMINAL ULTRASOUND August 2, 2022: FINDINGS: Liver (abnormal): The liver is minimally enlarged with mild hyperechogenicity and heterogeneity. There is no evidence of discrete liver nodules or masses. Gallbladder (normal): The gallbladder is unremarkable without evidence of luminal debris or wall thickening. Gastrointestinal tract (normal): Imaged portions of the gastrointestinal tract are normal in diameter, wall thickness, and layering. Patient is still having diarrhea. Not responsive to Metronidazole, carafate or endosorb tablets. Symptoms started around July 20 22
 Abnormal PE/Chem/CBC/UA Results: CBC - MCV 60.8fL MCHC 38.6g/dLMPV14.2fL Electrolytes Sodium 142mmol/L Potassium 6.6mmol/L Chloride 108mmol/L Chem - ALT 263U/L ALP1814U/L Pre-ACTH cortis 1.3 ug/dL Post ACTHcortis 1.4 ug/dL Stim test performed at Canadian valley vet on 7/27/22

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Parts of the crown of all canine teeth are absent, exposing the pulp cavity to the dental surface. The pulp cavity of triadan 204 is moderately widened and periapical lysis of the alveolar bone with perforation of the lateral osseous lamella of the alveolar crest is seen with an associated mild soft tissue swelling.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME

Neel Veterinary Hospital

REFERRING VET

Dr. Deepan Kishore

INVOICE

53378

DATE

8-9-22



PATIENT The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.
Cliste Hill

Thorax

SPECIES Multifocal spondylosis formation is seen along the thoracic spine. Both shoulder joints present mild osteophyte new bone formation. At the caudal margin of the left glenoid cavity, an isolated mineralized body, measuring 2 mm in size is seen.
Canine

BREED 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.

Retriever/Golden/
Mix The cardiovascular structures including the pulmonary vasculature are within normal limits.

SEX 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.

Spayed Female In the caudodorsal aspect of the right caudal lung lobe, a mild irregular margined, ovoidal shaped, soft tissue attenuating mass, measuring 4.7 x 3.0 x 3.5 cm in size. In the accessory lung lobe and cranial tip of the right cranial lung lobe, a well-defined soft tissue nodule, measuring up to 6 mm in size.

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

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

HOSPITAL NAME 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.

Neel Veterinary
Hospital In the region of the left adrenal gland, an ill-defined soft tissue attenuating and mild heterogeneous contrast enhancing mass is seen, measuring 5.3 x 4.3 x 4.0 cm in size; mild interspersed punctuate mineralization of the mass is seen. The mass is partially encompassing the caudal vena cava and the celiac artery & cranial mesenteric artery. The mass is extending up to the right adrenal gland

REFERRING VET Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.
Dr. Deepan Kishore

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

53378 The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

DATE Multifocal moderate spondylosis formation is seen along the lumbar spine. The intervertebral discs L6/L7 and L7/S1 are moderately protruding into the vertebral canal.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Retroperitoneal soft tissue mass, likely originating from the left adrenal gland, partially encompassing the large vessels at the same level
- Structured nodular interstitial lung pattern with a larger mass in the right caudal lung lobe
- Complicated dental fracture 104, 204, 304 and 404
- Periodontal abscess 204
- Intervertebral disc protrusion L6/L7 and L7/S1 with potential dynamic compression of the cauda equina fibers
- Spondylosis deformans

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with a retroperitoneal mass in the region of the adrenal glands – likely originating from the left adrenal gland. Carcinoma, pheochromocytoma or sarcoma are considered as the top differentials here. As the large unpaired aortic vessels are embedded within the mass, complete surgical resection is not feasible.

The pulmonary lesions are suggestive for pulmonary metastatic spread or less likely present a second entity with primary pulmonary neoplasia.

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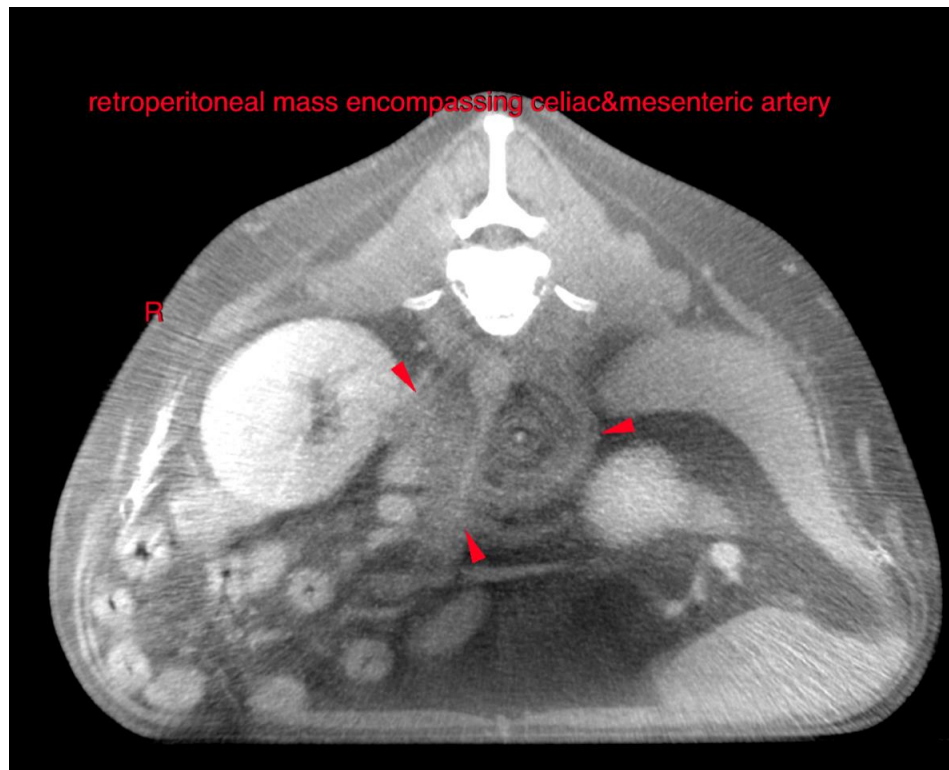
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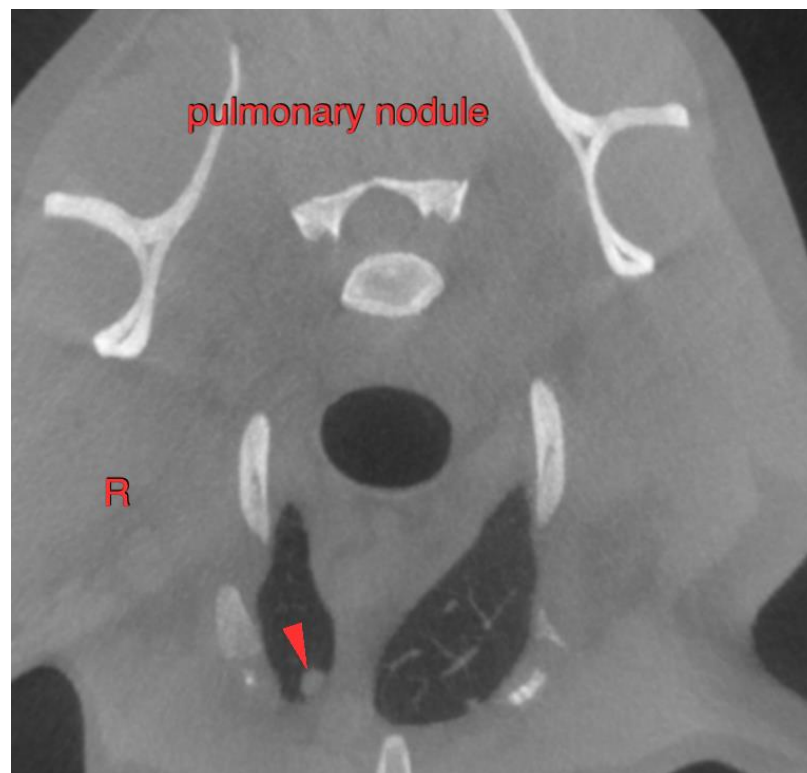
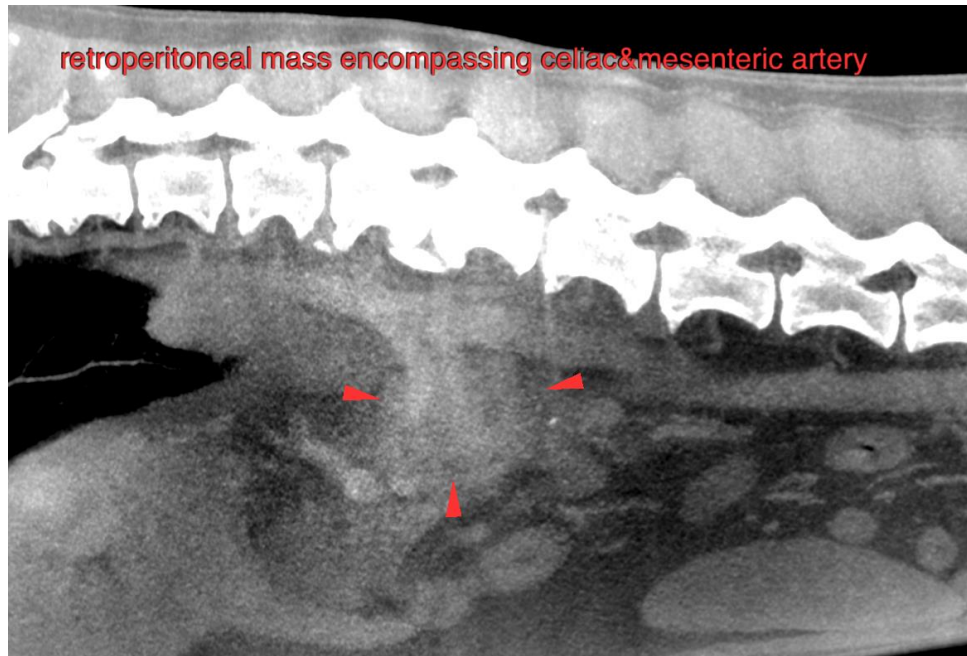
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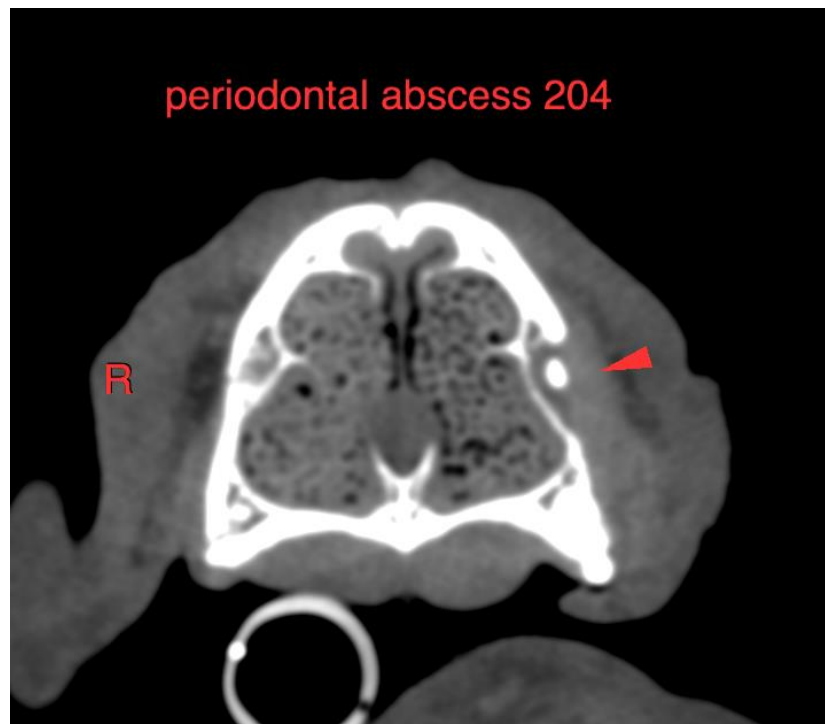
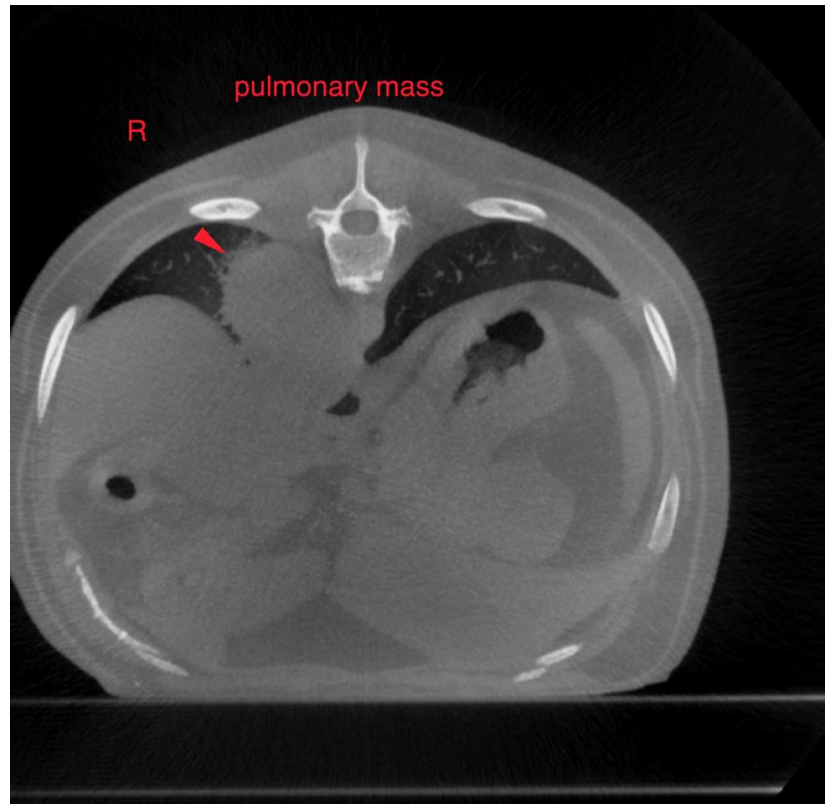
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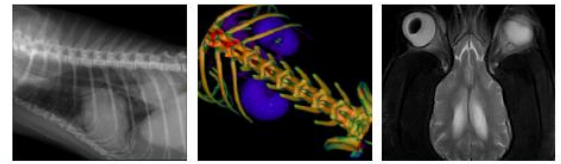
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

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sebast.schaub@gmail.com

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