



PATIENT PRESENTING CLINICAL SIGNS

Watson Hutton September 18th, 2022- Watson presented to NVH after being uncomfortable, vomiting, and not having a bowel movement for several days. Watson had bloodwork overnight which showed elevation of his kidney enzymes. Radiographs of the abdomen show a subjectively large liver and spleen with no sign of foreign body obstruction. On physical exam, Watson is lethargic, normal respiratory rate, and temperature. Watson had no heart murmur on auscultation. Watson was hospitalized on fluids for dehydration, antibiotics, gastroprotectants, and pain medication. Watson had an abdominal ultrasound
Abnormal PE/Chem/CBC/UA Results:

BREED COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

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

SEX COMPUTED TOMOGRAPHIC FINDINGS

Neutered Male Thorax

Mild central mineralization of all intervertebral discs along the thoracic spine is appreciated. Level with the intervertebral disc space T12/T13, mild mineralized disc material is mildly bulging into the vertebral canal, distorting the ventral epidural space at the same level and occupying approximately 5% of the cross-sectional area of the vertebral canal at the same level.

AGE

9 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

HOSPITAL NAME

Neel Veterinary Hospital

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

REFERRING VET

Dr. Deepan Kishore

Abdomen

In the retroperitoneal fat – R>>L – presents with moderate fat-stranding, most accentuated in the region of the right kidney.

INVOICE

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Originating from the right adrenal gland, an ovoidal shaped uniform soft tissue attenuating and moderate contrast enhancing mass is visible, measuring 36 x 20 x 30 mm in size. Level with the orifice of the phrenicoabdominal vein in the caudal vena cava, a mushroom shaped intraluminal filling defect is appreciated, occupying approximately up to 80% of the cross-sectional area of the caudal vena cava at the same level.

DATE

9-20-22

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 left adrenal gland is within normal limits for size and shape.



PATIENT

Watson Hutton

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

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

SPECIES

Canine

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

The intervertebral disc L3/L4 is moderately protruding into the vertebral canal, occupying approximately up to 20% of the cross-sectional area of the vertebral canal at the same level.

BREED

Corgi Mix

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right adrenal mass with vascular invasion of the caudal vena cava
- Retroperitoneal effusion, R>>L
- Intervertebral disc protrusion L3/L4 with possibly dynamic myelocompression
- Multifocal chondroid disc degeneration
- No evidence of pulmonary metastatic disease

SEX

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9 Years

The CT study is consistent with primary right adrenal neoplasia - pheochromocytoma or adenocarcinoma are the top differentials. The right adrenal mass presents evidence of vascular invasion and retroperitoneal hemorrhage. The latter might be a source for the described clinical signs. Right sided adrenalectomy is considered as the therapy of choice.

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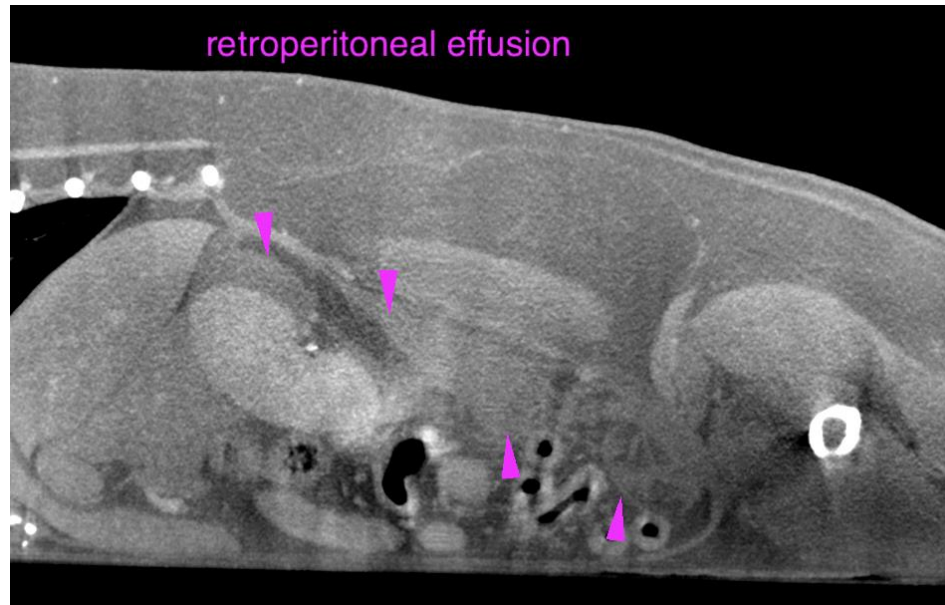
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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