



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Maya Ramirez **PRESENTING CLINICAL SIGNS** History: Internal medicine consultation and abdominal ultrasound were requested for Maya due to suspected abdominal mass and weight loss.

SPECIES Abnormal PE/Chem/CBC/UA Results: Abdominal Ultrasound Findings Right Kidney: within normal sonographic limits it measured cm Left Kidney: within normal sonographic limits; it measured cm
Feline Liver: within normal sonographic limits Gallbladder: within normal sonographic limits Pancreas: no obvious abnormalities were noted Stomach: within normal sonographic limits Intestines: within normal sonographic limits Spleen: within normal sonographic limits Urinary bladder: in the urine there was a small amount of floating debris; no stones or urethral obstruction was noted Right Adrenal: was not seen Left Adrenal: was not seen Lymph nodes: in the mid abdomen, there is a soft tissue mass with some mineralization within it; it appears to be a mesenteric lymph node; in one window it measured 1.78 cm Other: the mesentery appeared hyperechoic Free fluid: none Diagnostic procedures performed: fine needle aspirate of the mesenteric lymph node **MICROSCOPIC FINDINGS:** Marked mixed inflammation with bacterial infection and low numbers of atypical epithelial cells. Comment: Findings confirmed marked inflammation with bacterial infection. Epithelial cells may represent hyperplastic and dysplastic resident intestinal epithelium however, given the presence of a discrete mass lesion, I cannot exclude an underlying intestinal carcinoma. Insufficient numbers of epithelial cells are found on these smears to confirm neoplastic process cytologically. Correlate with diagnostic imaging. Biopsy with histopathology is recommended to further characterize this mass.

BREED DSH
SEX Spayed Female

AGE 10 Years

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

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

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

COMPUTED TOMOGRAPHIC FINDINGS

Multiple small soft tissue attenuating nodules are noted throughout the peritoneal cavity.

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.

Mobile Pet Imaging

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

REFERRING VET

Meaux

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

INVOICE

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Post contrast administration, multiple ill-defined variable sized (measuring up to 1.4 cm in diameter), mild hypoattenuating lesions are noted throughout the hepatic parenchyma, presenting an ill-defined contrast enhancement pattern tapering towards the center of the roundish hepatic lesions. In the caudal vena cava, level with a roundish post contrast hypoattenuating parenchymal lesion, a small fusiform shaped filling defect is noted within the caudal vena cava occupying approximately 5% of the cross-sectional area of the caudal vena cava at the same level.

DATE

9/27/21



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

Maya Ramirez

SPECIES The mid segment of the descending colon presents an eccentrically growing, mild irregular mass with a slight heterogeneous contrast enhancement pattern and segmental loss of wall layering. The intramural lesion of the descending colon is measuring approximately 19 x 15 x 30 mm in size.

Feline

COMPUTED TOMOGRAPHIC DIAGNOSIS

- BREED**
- Mural soft tissue mass descending colon
 - Multiple ill-defined variable sized post contrast mild hypoattenuating intrahepatic lesions – small tumor thrombus in hepatic segment of the caudal vena cava
 - Multiple small soft tissue nodules throughout the peritoneal cavity
- DSH**

SEX INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE The findings are compatible with disseminated neoplastic disease with hepatic intraparenchymal lesions, a mural mass of the descending colon and multiple soft tissue nodules throughout the peritoneal cavity. The top differential is carcinomatosis. Although surgical resection of the mass of the descending colon is feasible, due to the multiple nodular lesions and hepatic lesions throughout all liver lobes, there is no curative surgical treatment option. FNA sampling of the mural mass and the liver can be used to evaluate the chances of accompanying chemotherapy. The prognosis is very guarded.

Spayed Female

10 Years

INTERPRETED BY

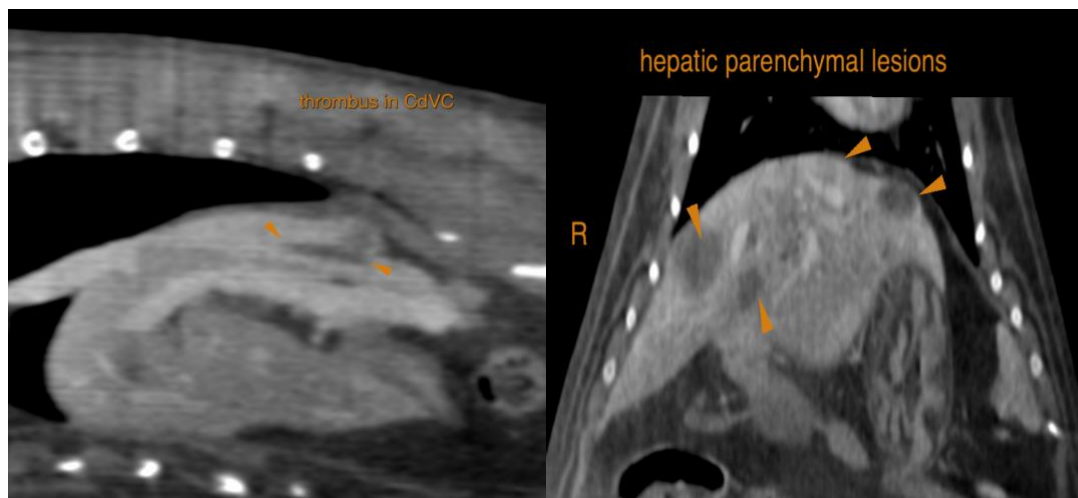
Sebastian Schaub,
DVM Dr. med. vet.
DipECVCI

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

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PATIENT

Maya Ramirez

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

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HOSPITAL NAME

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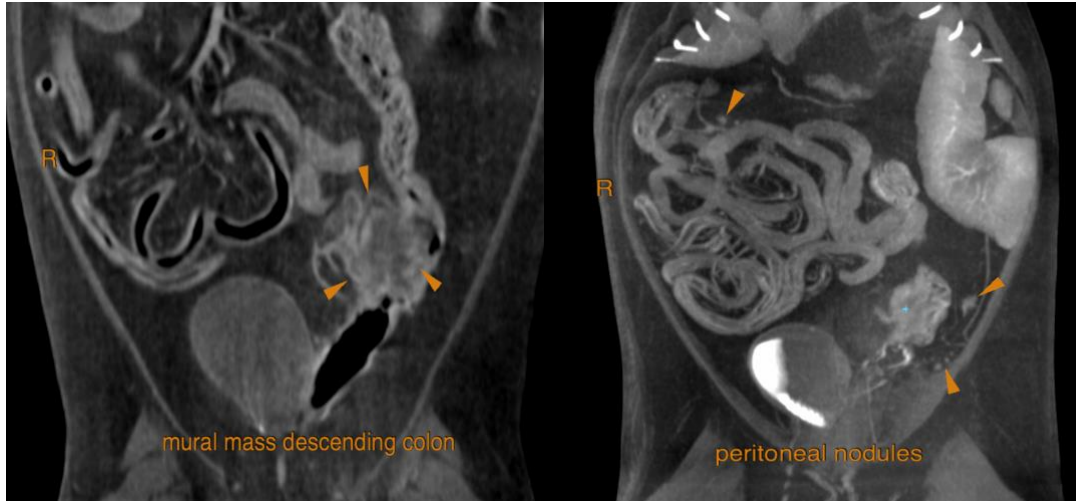
Meaux

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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