



PATIENT PRESENTING CLINICAL SIGNS

Bishop Rojas History of hepatic carcinoma for 2 years. Chronic discopathy L5 Previous CT in 2021

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

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

Canine

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

BREED

Yorkshire Terrier

Multifocal spondylosis formation is seen along the thoracic spine. The 8th to 10th right rib present with a healed transverse costal fracture.

SEX

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.

Neutered Male

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

AGE

11 Years

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.

In the caudodorsal aspect of the cranial part of the left cranial lung lobe, an ill-defined peribronchial consolidated region is visible. The lung parenchyma presents the expected architecture and attenuation behavior.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

Abdomen

HOSPITAL NAME

Mobile Pet Imaging

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

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a both kidneys present with multiple small intraparenchymal roundish filling defects

REFERRING VET

Meaux

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

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

INVOICE

54329

Originating from the left division of the liver, a large, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is visible, measuring 6.0 x 7.3 x 9.8 cm in size. There is a second mass in the region of the right medial liver lobe, measuring 4.3 x 6.1 x 5.0 cm in size. The stomach is deviated to the left by the mass effect

DATE

9-28-22

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

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



PATIENT The intervertebral disc space L4/L5 is collapsed, and the vertebral endplates present with multiple moth eaten defects and spondylosis formation.

Bishop Rojas

COMPUTED TOMOGRAPHIC DIAGNOSIS

SPECIES

Canine

- Left divisional hepatic mass – suspect of the right medial & lateral liver lobe
- Peribronchial consolidated region left cranial lung lobe
- Chronic discopathy L4/L5 without signs of compressive myelopathy
- Renal cysts
- Chronic costal fracture 8th to 10th right rib – fracture lines are in the remodeling phase
- Spondylosis deformans

BREED

Yorkshire Terrier

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Neutered Male

The findings are fitting the history of hepatic carcinoma, originating from the left division of the liver – suspect left lateral & medial liver lobe. The latter appears to be deviated to the right sided due to the mass effect. As the hepatic masses appear to extend up to the hilar region of the liver, complete surgical excision might not be possible, however final decision making will warrant diagnostic celiotomy.

AGE

11 Years

The peribronchial consolidated region of the left cranial lung lobe is most suggestive for an inflammatory lesion and the odds for metastatic disease are considered low.

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Mobile Pet Imaging

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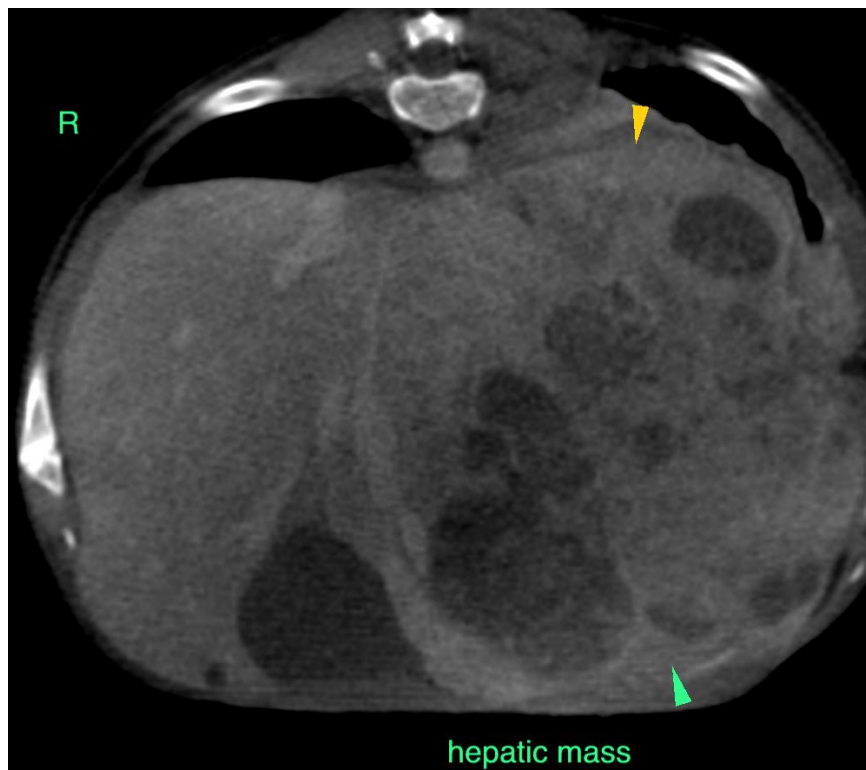
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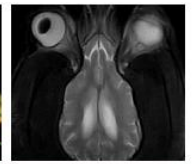
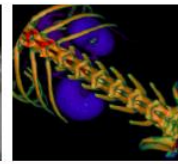
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SPECIES

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Yorkshire Terrier

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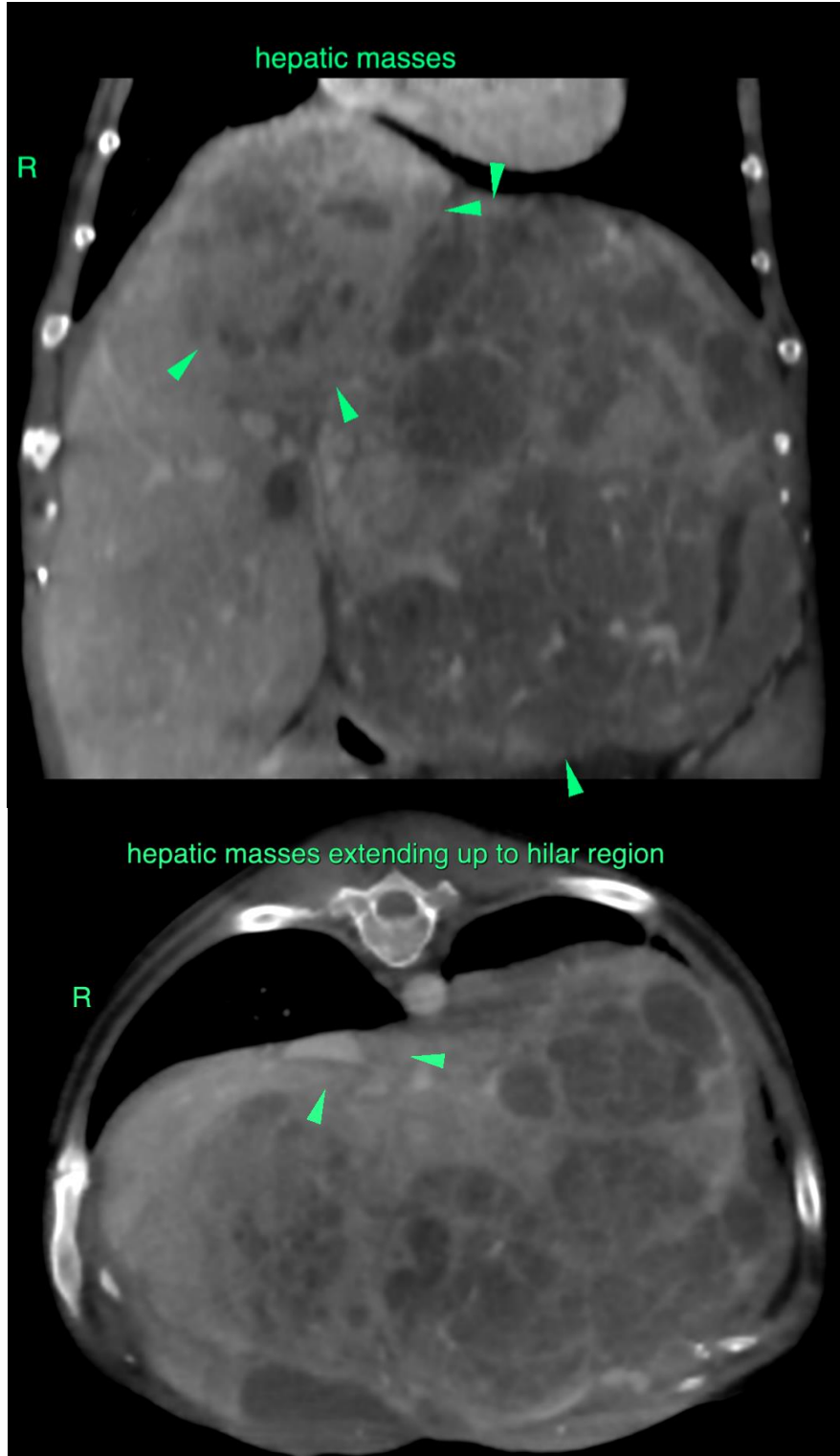
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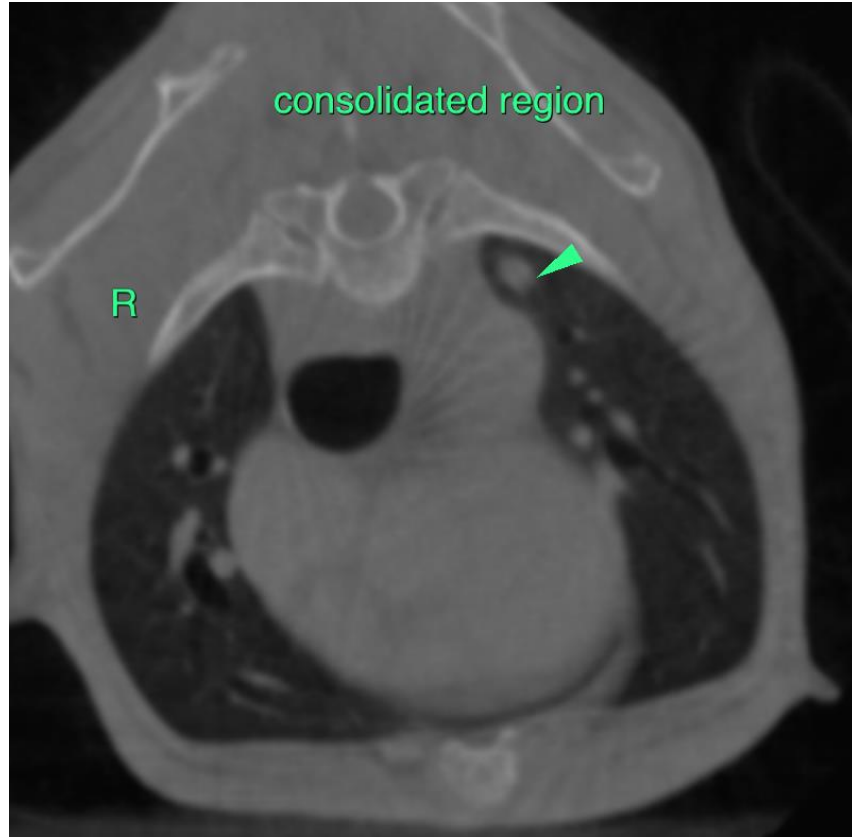
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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