



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Hippo Anderson
SPECIES Canine
BREED Border Collie/Australian Shepherd Mix
SEX Neutered Male
AGE 8 Years

History: Hippo presented for evaluation of a mass in the right retropharyngeal area, noticed 2.5 weeks ago. Histiocytic sarcoma of the right rear leg was diagnosed 6 months ago. Initially, osteosarcoma was suspected based on imaging. The right rear leg was amputated 6 months ago. He had TPLO surgery in both knees previously. The retropharyngeal mass is not rapidly growing. FNA of the mass is highly concerning for sarcoma. Oncologist (Colorado State University) still felt osteosarcoma vaccine was a good choice. Cancer vaccine was given. Decreased exercise since amputation. Has gained 4 lbs of body weight. Previous diagnosis: Histiocytic sarcoma removed with amputation of right rear limb 6 months ago. Purpose of CT scan: Surgical removal, staging Location of CT scan: Head/neck, chest, abdomen Mass (behaviors): No obvious changes Limping: Left front Therapies tried and response: None Current medication: Rimadyl for 5 days Current symptoms: Decreased energy, weight gain, rear leg sometimes uncomfortable. General health status: Good appetite. Energy a little decreased but was low energy before. No vomiting or diarrhea.

Abnormal PE/Chem/CBC/UA Results: PE: There is a 6 cm diameter firm mass arising from the right retropharyngeal area just caudal to the ramus of the mandible Lab: Bloodwork is dated 11/12/21. CBC - PCV = 52%, WBC = 8900, neutrophils = 6586, lymphocytes = 1068, monocytes = 623. Platelets = 331,000. Chemistry - all else normal. Urinalysis is not provided. T4 - normal.

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX, ABDOMEN AND LEFT HIND LIMB

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

COMPUTED TOMOGRAPHIC FINDINGS

INTERPRETED BY

Skull

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants. The nasal cavity presents the expected aerated spaces between thin and even conchae and turbinates with smooth mucosal lining.

HOSPITAL NAME

VetMed Consultants

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

REFERRING VET

Angela West

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.

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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.

DATE

11/24/21



PATIENT	Originating from the right mandibular salivary gland a heterogeneous contrast enhancing irregular mass is visible. The left mandibular salivary gland presents a small nodular mass with a heterogeneous contrast enhancement pattern protruding from the ventral surface of the left mandibular salivary gland.
Hippo Anderson	
SPECIES	The right medial retropharyngeal lymph node is moderately enlarged, rounded and presents a heterogenous contrast enhancement pattern.
Canine	In the subcutaneous tissue at the left dorsolateral aspect of the neck, level with C2/C3, mild irregular contrast enhancing subcutaneous mass is visible.
BREED	Thorax
Border Collie/Australian Shepherd Mix	Medial to the left latissimus dorsi muscle, a large lipoma is extending along the left laterodorsal thoracic wall. Both humeral heads present a small crescent shaped depression of the caudal aspect.
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 pattern is uniform and considered within normal limits.
Neutered Male	The cardiovascular structures including the pulmonary vasculature are within normal limits.
AGE	Multifocal throughout the lung parenchyma, variable sized (measuring up to 17 mm in diameter), well-defined, soft tissue attenuating nodular lesions are visible.
8 Years	Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.
INTERPRETED BY	Abdomen
Sebastian Schaub, DVM Dr. med. vet. DipECVDI	The right kidney present with two post contras hypoattenuating irregular marginated parenchymal masses, distorting the renal margins.
HOSPITAL NAME	In the sublumbar region multiple confluent, heterogeneous contrast enhancing masses are visible.
VetMed Consultants	Multiple mild contrast enhancing lesions are seen along the epaxial musculature of the lumbar spine. Irregular contrast enhancing mass lesions are protruding bilaterally into the pelvic canal.
REFERRING VET	The right hind limb is amputated in level with the proximal femoral diaphysis. There are multiple heterogeneous contrast enhancing soft tissue nodules visible level with the stump of the right hind limb.
Angela West	The left hind limb presents a large intramuscular soft tissue mass within the semimembranosus muscle, presenting a heterogeneous contrast enhancement pattern. Multiple heterogeneous contrast enhancing nodular lesions are seen throughout the medial thigh musculature of the left hind limb.
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PATIENT Hippo Anderson
 The left stifle joint presents moderate to marked osteophyte new bone formation, the synovial lining is moderately thickened and moderate joint effusion is visible. There is a TPLO implant seen at the medioproximal aspect of the left tibia.

Intraluminal filling defects are seen in the iliac vein bilaterally.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- History of amputation right hind limb
- Intramuscular mass left semimembranosus muscle
- Multiple intramuscular lesions along the musculature of the lumbar spine
- Right sided renal masses
- Multiple sublumbar soft tissue masses, partially encompassing the aorta and caudal vena cava with thrombus formation in the iliac veins bilaterally
- Bilateral masses of the mandibular salivary glands
- Soft tissue masses in the pelvic canal
- Structured nodular interstitial lung pattern
- Lymphadenopathy right medial retropharyngeal lymph node
- History of TPLO left stifle joint with advanced degenerative joint disease
- Lipoma left thoracic wall

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

8 Years

The findings are consistent with disseminated neoplastic disease – suspect osteosarcoma. Treatment options are limited to palliative management of the patient; the long-term prognosis is infaust.

INTERPRETED BY

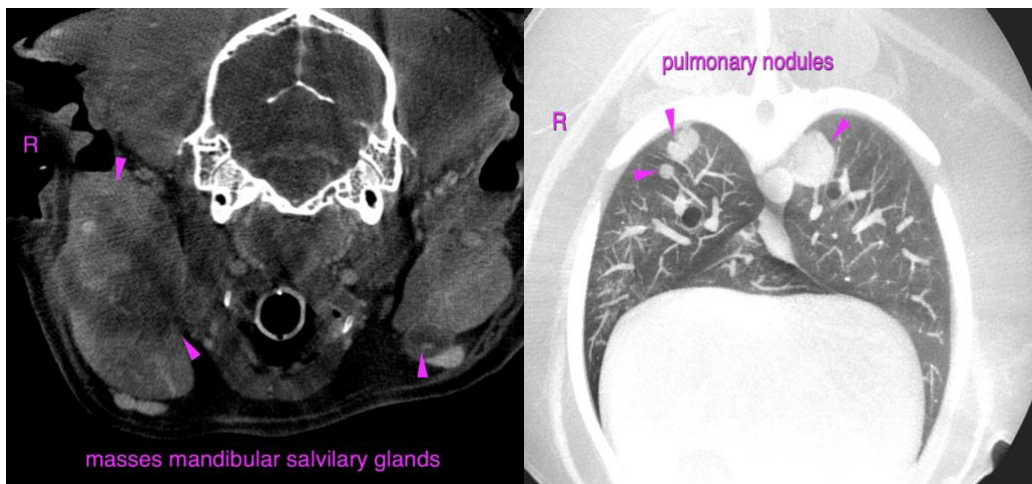
Sebastian Schaub, DVM Dr. med. vet. DipECVDI

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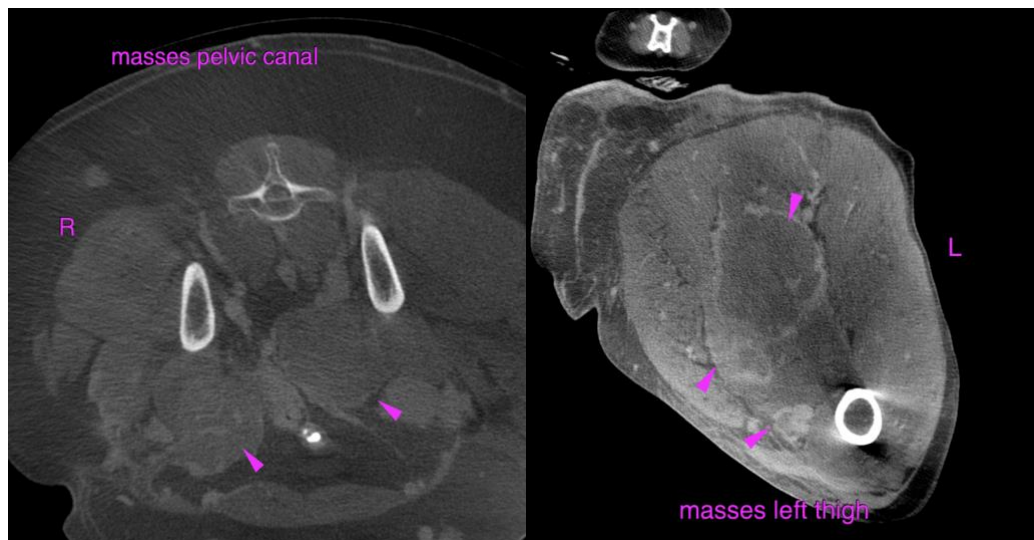
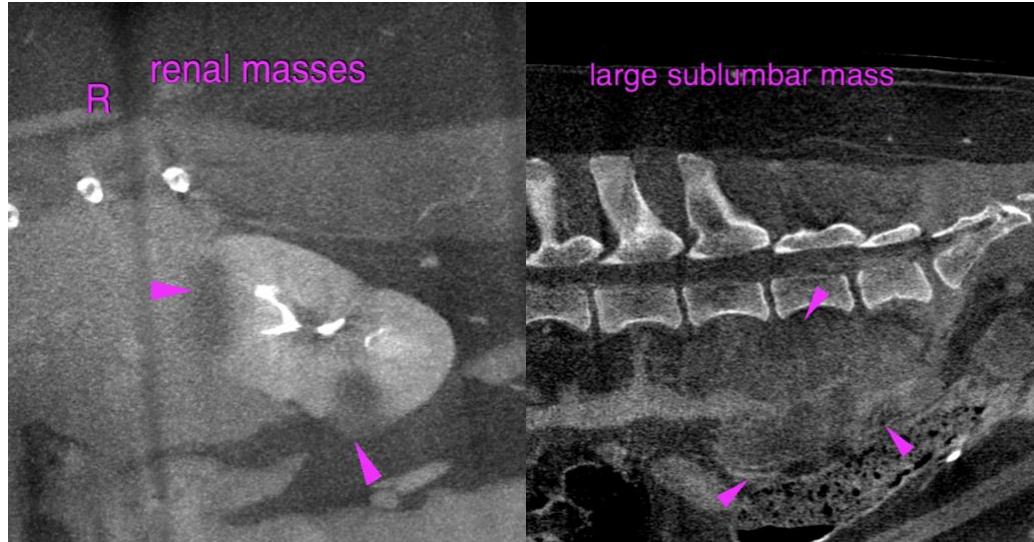
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com



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