



PATIENT PRESENTING CLINICAL SIGNS

Diablo D'Amico Dog with mild chronic azotemia, previously lyme positive, proteinuria (r/o lyme nephritis vs CKD). Incidental mass palpated right caudal ventral abdomen. Appears hyperechoic and laminar on ultrasound. No history of known trauma or foreign body ingestion. Intermittently lethargic and hyporexic

SPECIES Abnormal PE/Chem/CBC/UA Results: Mild azotemia, proteinuria.

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED ABDOMEN

Australian Cattle dog

A large, elongated, mixed fat and soft tissue enhancing mass, with partially defined borders are seen in the ventrocaudal abdomen and protruding to the body wall. The mass is mostly on the interior of the abdominal cavity, however, a partial loss of integrity of the body wall muscle is seen adjacently. However, no external communication, draining tract, or radiopaque foreign material are seen. There is a separation between the rectus abdominis, internal, and external oblique muscles adjacent to the mass on the right side. There is no connection of the mass with abdominal organs or intestinal tract. The mass measures approximately 13.0cm x 13.0cm x 8.8cm considering the soft tissue portion and fat portion.

SEX

MN

AGE

12 Years

A small cyst is seen within the left lateral hepatic lobe. The remainder of the liver is homogeneously soft tissue attenuating and uniformly contrast enhancing with normal size and shape. The gallbladder is unremarkable. The intra-hepatic portal and hepatic vasculature are normal.

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

The spleen is mildly diffusely enlarged, regular contour and normal shape, however, mildly heterogeneous in enhancement with a few ill-defined hypoattenuating nodules. The largest measures 1.5cm in the spleen body.

The renal silhouettes are normal in size, shape, contour, and attenuation pre- and post-contrast. The renal length is 5.5cm in the right kidney and 6.1cm in the left kidney.

HOSPITAL NAME

Animal Health Partners

The ureters are normal in size with correct insertion in the trigone region.

The urinary bladder is moderately filled, with the apex in the plane of L6, and is homogeneously soft tissue opaque.

REFERRING VET

Dr. Ashley Gold

The stomach is mildly filled and normally positioned, containing gas admixed with homogeneous soft tissue attenuating ingesta.

The duodenum and small intestine are nondilated and contain a minimal amount of fluid attenuating material and gas.

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The colon and rectum contain gas admixed with heterogeneously soft tissue attenuating fecal material.

The pancreas, adrenal glands, and mesentery are normal.

DATE

4-11-23



PATIENT The right medial iliac lymph node is mildly enlarged with normal shape and enhancement. It measures 2.6 cm in length. The left medial iliac lymph node is normal. The remainder of the abdominal lymph nodes are normal.
Diablo D'Amico

THORAX

SPECIES

Canine

The trachea and main bronchus are normal.

There are multiple subpleural hyperattenuating foci within the lung parenchyma.

BREED

Australian Cattle dog

The remainder of the pulmonary parenchyma is normal in attenuation. No pulmonary nodules are seen.

The pleural space and mediastinum are normal. No evidence of enlarged mediastinal lymph nodes.

SEX

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The diaphragm and thoracic wall are normal.

The cardiovascular structures are normal.

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Multifocal thoracic, lumbar, and lumbosacral completed or incomplete bridging spondylosis deformans are seen.

The bilateral shoulders present periarticular ossification.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large, right-side, ventral intra-abdominal fat and soft tissue attenuating mass contiguous with the abdominal wall and partially interrupting the integrity of the adjacent muscle body wall. The differential diagnosis includes abdominal infiltrative lipoma with hemorrhagic component, intra-abdominal liposarcoma, and other neoplasm process.
- Right side medial iliac lymphadenopathy, reactive or metastatic.
- Splenomegaly, the differential diagnosis includes lymphoid hyperplasia, extramedullary hematopoiesis, less likely infiltrative neoplasm, or metastatic disease.
- Incidental hepatic cyst.
- Multiple incidental pulmonary osteomas, no evidence of pulmonary metastatic disease.
- Otherwise, normal thorax.
- Multifocal thoracic, lumbar and lumbosacral spondylosis deformans.
- Bilateral shoulder osteoarthritis.

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Partners

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The right sided ventral abdominal mass previously detected by the ultrasonographic exam is confirmed. The mass is not correlated to any abdominal parenchyma organ, lymph node, or intestinal tract. The characteristics of the mass indicate a mixed soft tissue and fat attenuation. There is no radiopaque foreign material or draining tract. Other differential diagnosis includes a granuloma or abscess, without origin or cause determination. Resectability of the mass is possible, and a surgical consultation is suggested. A biopsy is required for diagnosis.



PATIENT An ultrasound guided FNA aspiration of the spleen is suggested.

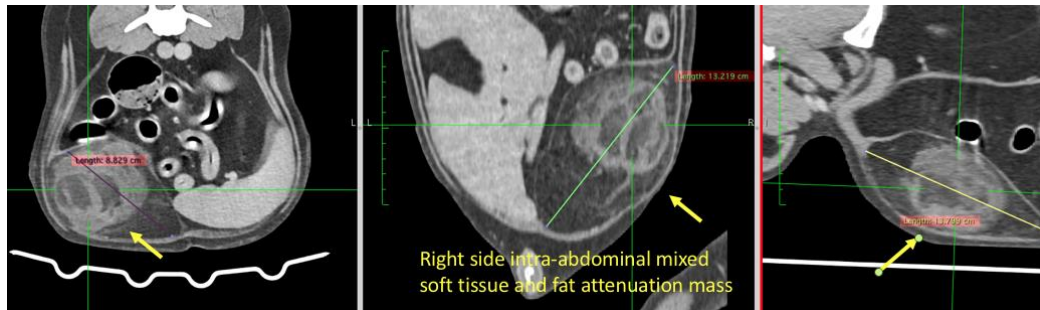
Diablo D'Amico

SPECIES

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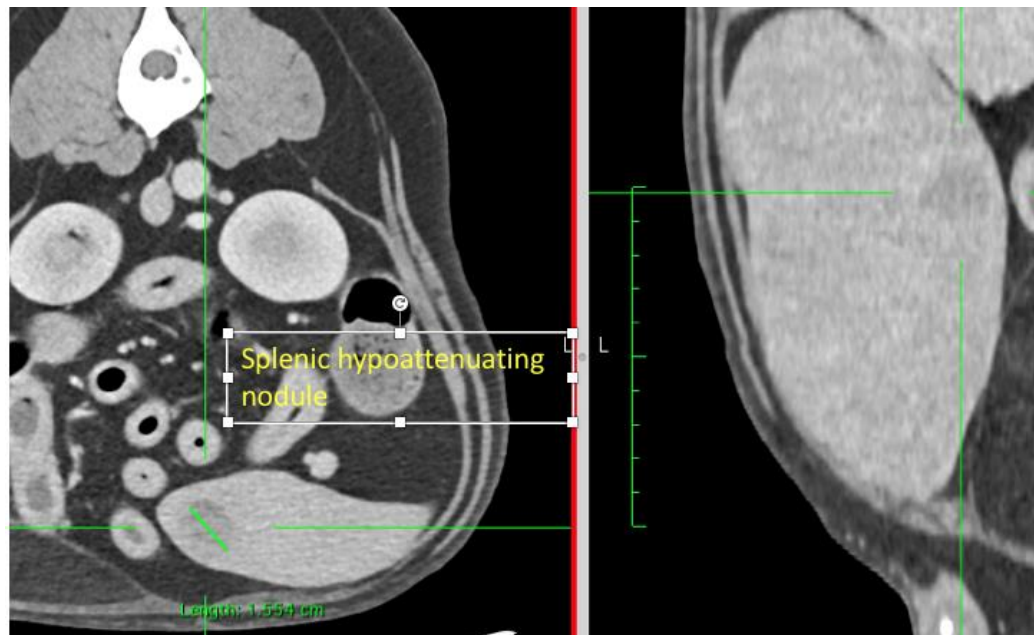
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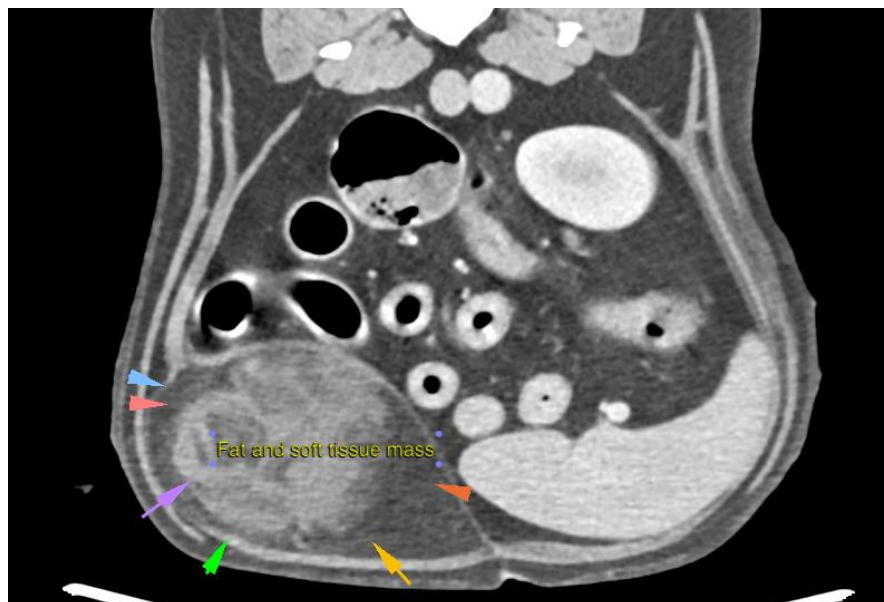
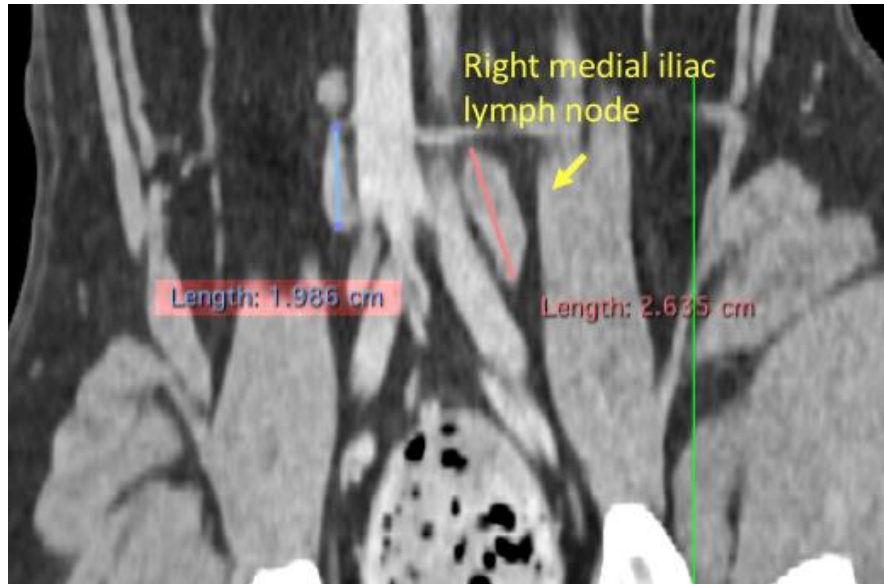
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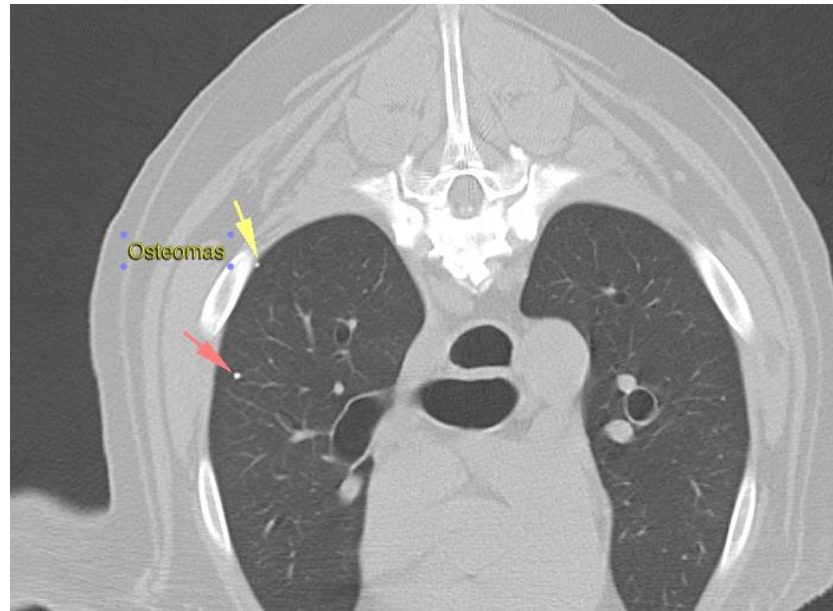
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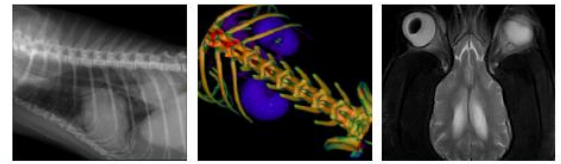
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PATIENT

Diablo D'Amico

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.

SPECIES

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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.

BREED

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