



PATIENT PRESENTING CLINICAL SIGNS

Watson Hohnstadt Watson was being prepped for left stifle LST surgery today when abdominal masses were palpated. aFAST revealed a mass within the capsule of the spleen as well as a much larger, cavitated mass adjacent to the tail of the spleen (and possibly attached). LST procedure was cancelled and abdominal CT was performed to evaluate extent of affected structures and masses within the abdomen. HO chronically elevated ALP between 300-600 over the past few years, no consistent increasing trend (last checked 2/2023 391)

SPECIES

Canine

BREED

Lab Mix

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

A pre- and post-contrast CT study of the abdomen are provided for review totaling two series. One pre-contrast series of the abdomen and one post-contrast series of the abdomen.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FS

The spleen is severely enlarged due to a multilobulated mass effect. There is a multifocal, multilobulated, heterogeneous, enhanced with cavitated hypoattenuating areas, mass within the head, body, and tail of the spleen. The larger mass effect within the splenic head measures approximately 9.4cm by 12.6 cm. The larger mass effect within the splenic tail measures approximately 12.7cm x 11.2cm x 7.8cm.

AGE

9 Years

A small amount of non-contrast enhancing fluid is located ventrally, caudally, on the left side, and within the mesenteric fat stores.

INTERPRETED BY

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

A few mildly enlarged mesenteric lymph nodes adjacent to the spleen are noted.
The visible portion of the hepatic parenchyma is unremarkable.
The kidneys are normal in size, shape, contour, and attenuation. Right kidney length 7.1cm, left kidney length 6.5cm.

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The ureters are normal in size with correct insertion in the trigone region.
The stomach is empty, contains minimal amount of gas admixed with homogeneous hypoattenuating fluid material.

REFERRING VET

Dr. Burge

The duodenum and small intestine are mildly dilated and contain a small amount of homogeneous hypoattenuating fluid content and minimal gas. The small intestines are dislocated to the abdominal periphery due to the splenic mass.

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The colon and rectum contain gas admixed with a small amount of soft tissue and heterogeneously attenuating fecal material.

The pancreas and adrenals are normal.

The uterus and ovaries are not applicable.

The diameter of the caudal vena cava vein is subjectively reduced in volume.

DATE

6-14-23



PATIENT Multifocal lumbar and lumbosacral complete and incompletely bridged spondylosis deformans is noted.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

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- Multifocal, complex, cavitated splenic masses, regional lymph node enlargement, and scant peritoneal effusion. The differential diagnosis includes neoplasia, for example, mesenchymal hemangiosarcoma, round cell tumor, plasma cell tumor with regional lymph node metastases. Other less likely diagnosis includes hematomas, or benign cavitated masses and reactive lymphadenopathy.

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- Scant volume of peritoneal effusion, differential diagnosis is neoplastic, modified transudate, hemorrhagic or inflammatory.
- Reduced volume of the caudal vena cava vein. The differential diagnosis includes hypovolemia.
- Otherwise, normal abdomen.
- Multifocal lumbar and lumbosacral spondylosis deformans.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FS

The computed tomographic findings confirm the splenic mass seen on the ultrasound exam. The splenic mass is likely a malignant neoplastic process. A biopsy or FNA exam is required for diagnosis.

AGE

A portion of the liver parenchyma and gallbladder were not collimated on the field.

9 Years

A thoracic radiograph is suggested to search for pulmonary metastases.

Due to the complex characteristics of the mass, a surgical approach and splenectomy should be considered.

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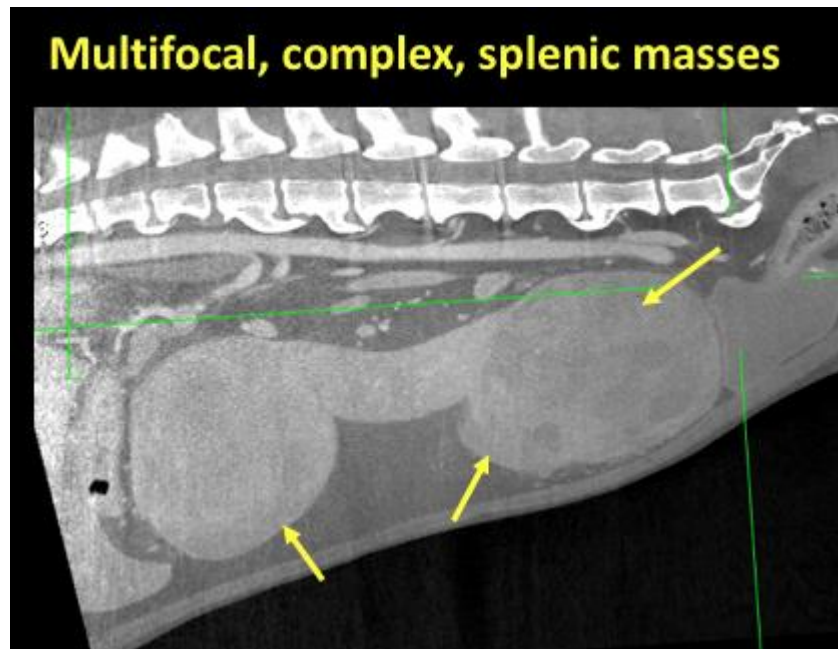
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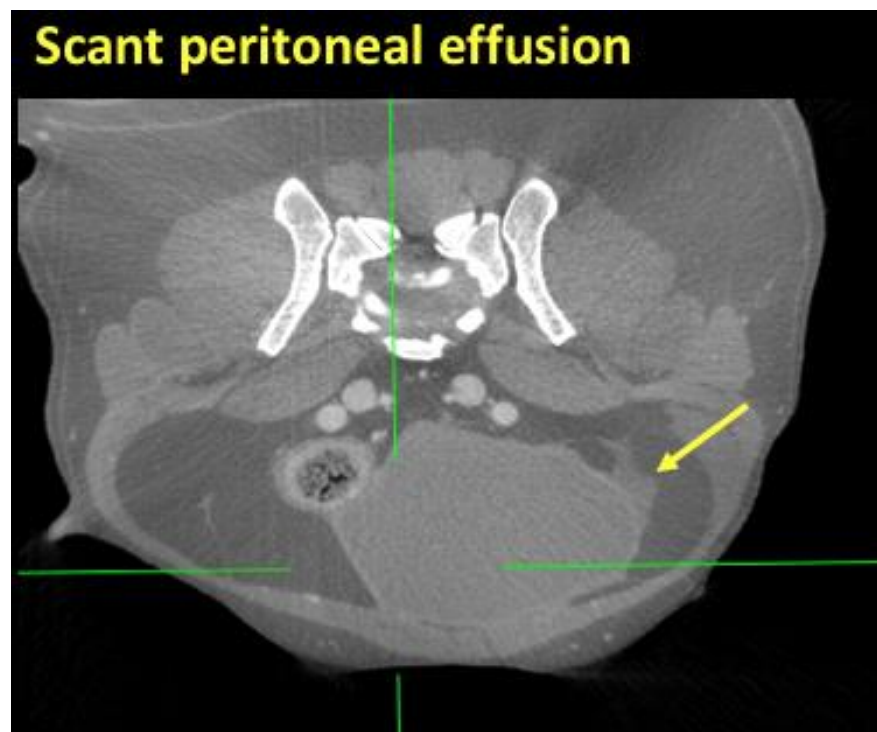
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PATIENT The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Watson Hohnstadt

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.

SPECIES

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