



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Franklin Wren
SPECIES Canine
BREED Labrador Retriever
SEX Male
AGE 3 Years, 4 Months

26/7/23 Reason: Sore back History: The owner said that few days ago Franklin jumped from the car and yelped. Since then is quiet and walking more slowly. Is not limping. 28/7/23 Has not changed, no response to pain med, on examination there is a subtle low grade HM, HR-100. temp 38.9, not able to get much reaction with hip extension, stifle extension, hock flexion. OK abdo palpation, there is subtle reaction with lumbar spine palpation. No improvement on pain relief, ddx infection- with presence of HM endocarditis? spondylitis? admit for bloods, rads lateral of chest and abdomen/spine and assess results, potentially u/s heart to check for pericardial effusion?? Admitted for more workup and then develop treatment plan from there. Bloods elevated neutrophils NSF otherwise. Lateral and VD rads of chest and abdomen and U/s of heart and no pericardial effusion present, on v.d chest does have a reverse D look but necessarily totally square image Lateral chest one image looks unusual ventral chest. Lateral abdomen potentially caudal aspect t12/T13 could be suspect? 1/8/23 CT of chest and abdomen to also look at what spine, disc/end plates, especially T12/13 region. ? other pathology Reassess heart murmur Ddx endocarditis? but does not fit in with history of yelping jumping out of car.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of thorax and abdomen are provided for review totaling 3 series. Three pre-contrast series, soft tissue, bone and lung algorithm. Three post-contrast series soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

THORAX

There is a large space-occupying extraluminal (mural) and luminal hypoattenuating heterogeneous mass effect within the cardiac base that is between the main pulmonary arteries, aorta, and right ventricle (topographic region of the pulmonary valve). The mass effect measures approximately 4.7cm by 4.2cm by 3.4cm. There is no evidence of pericardial effusion.

On the cranial mediastinum, the sternal and mediastinal cranial lymph nodes are enlarged, mildly heterogeneous, and rounded. The sternal lymph node measures 2.5cm by 0.9cm. The cranial mediastinal lymph node measures 4.1cm by 2.1cm.

Multiple variably sized pulmonary subpleural soft tissue attenuating nodules are seen and measure between 1.6cm to 0.4cm in diameter.

The trachea and main bronchus are normal.

The pleural space is normal.

The thoracic esophagus is minorly distended by intraluminal gas content, likely correlated to the anesthesia.

The diaphragm and thoracic wall are normal.

ABDOMEN

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DATE

7-31-23

INTERPRETED BY

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

HOSPITAL NAME

Adelaide Plains Veterinary Surgery

REFERRING VET

Dr J Katakasi



PATIENT	There is a moderately sized, rounded, hypoattenuating nodular lesion within the right lateral hepatic lobe that measures approximately 3.1cm by 3.1cm by 2.7cm. The remainder of the liver parenchyma is homogeneously soft tissue attenuating and uniformly contrast-enhancing, with normal size and shape. The gallbladder and common bile duct are unremarkable.
Franklin Wren	
SPECIES	There are a few variably sized rounded hypoattenuating nodular lesions within the cortical and medullary kidneys, two smaller at the right kidney and two larger at the left kidney. The larger hypoattenuating lesions cause a mild capsular distortion of the left kidney. The lesions measure between 0.6cm and 2.4cm. The renal pelvis is unremarkable.
Canine	
BREED	The ureters are normal in size with correct insertion in the trigone region.
Labrador Retriever	The urinary bladder is moderately filled, with the apex in the plane of L6, and is homogeneously soft tissue opaque. No evidence of radiopaque calculi.
SEX	The spleen is homogeneously soft tissue attenuating, and uniformly contrast enhancing, with normal size and shape.
Male	The stomach is moderately distended, containing heterogeneous ingesta mixed with hypoattenuating fluid material and gas. Normal position.
AGE	The duodenum and small intestine are nondilated and contain a small amount of fluid attenuating material and gas.
3 Years, 4 Months	The colon and rectum contain gas admixed with heterogeneously soft tissue attenuating fecal material.
INTERPRETED BY	The pancreas and mesentery are normal.
Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet	The abdominal lymph nodes and adrenal glands are normal.
	The prostate is small and intrapelvic, normal for castrated patient.
HOSPITAL NAME	The musculoskeletal structures are unremarkable.
Adelaide Plains Veterinary Surgery	COMPUTED TOMOGRAPHIC DIAGNOSIS
REFERRING VET	<ul style="list-style-type: none"> • Large space-occupying extra (mural) and/or intraluminal heart base cardiac mass. The differential diagnosis includes neoplasm, for example, hemangiosarcoma, chemodectoma, mesothelioma, lymphoma, or rhabdomyosarcoma. • Multifocal, multiple, variably sized soft tissue attenuating pulmonary nodules are - correlated to metastatic pulmonary disease. • Sternal and cranial mediastinal enlarged lymph nodes, metastatic • Rounded hypoattenuating nodular lesion within the right lateral hepatic lobe, metastatic. The differential diagnosis includes benign nodular hyperplasia. • Few variably sized rounded hypoattenuating lesions within the kidneys, metastatic. The differential diagnosis includes less likely cystic lesions.
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PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Franklin Wren

The tomographic abnormalities in the thorax and abdomen are likely correlated. The lesions could or could not explain the present clinical signs. The cardiac heart base mass can explain the identified heart murmur. Full echocardiographic exam is suggested for better analysis of the cardiac chambers, lumen, and invasiveness of the heart base mass. If attainable, consider a thoracic ultrasound guided fine-needle aspiration of the cranial mediastinal lymph node for cytologic analysis.

SPECIES

Canine

No evidence of musculoskeletal lesions that can explain the reaction at the lumbar spine or evidence of suspect lesion in T12-T13 region.

BREED

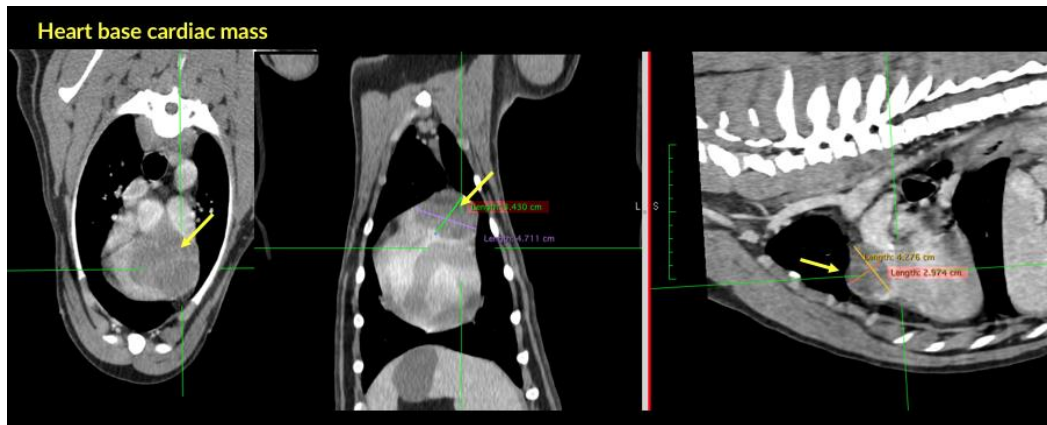
Labrador Retriever

SEX

Male

AGE

3 Years, 4 Months



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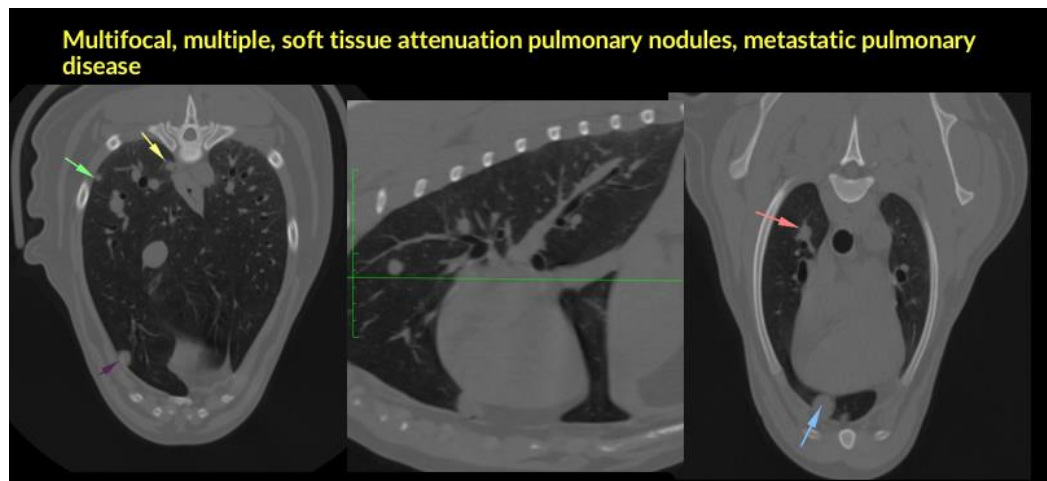
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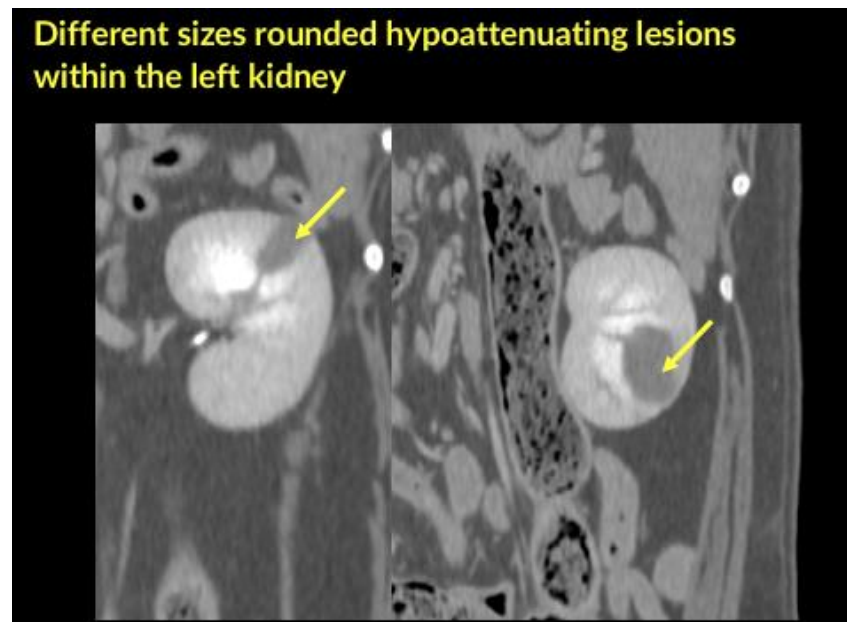
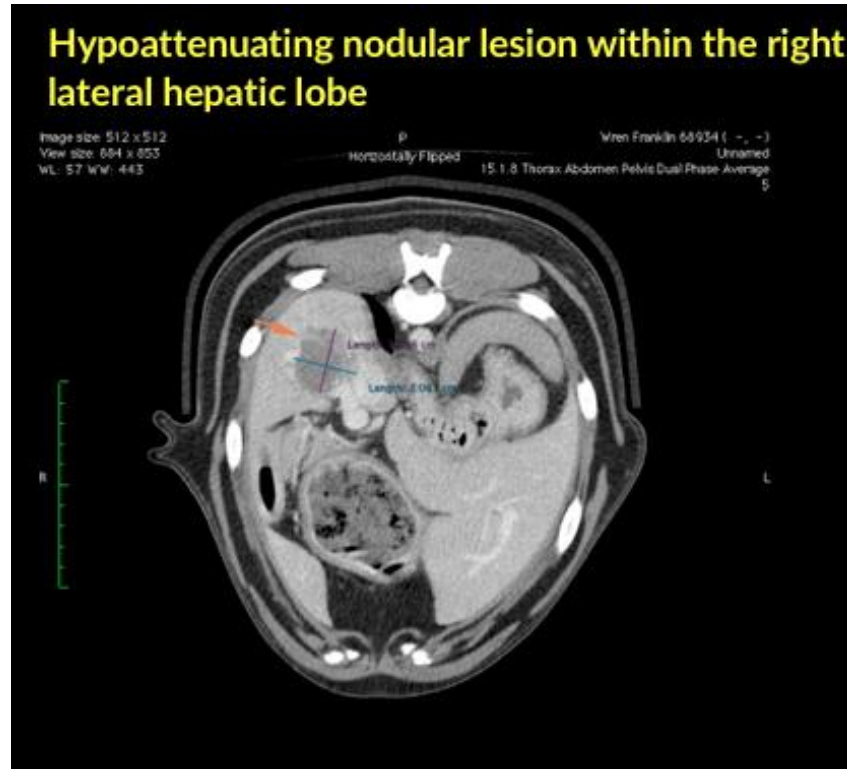
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

HOSPITAL NAME

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Veterinary Surgery

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