



**PATIENT PRESENTING CLINICAL SIGNS**

Nick Seeler History: Presented for cervical mass recently noticed. No dysphagia, no pain, bright and alert.

**SPECIES**

Abnormal PE/Chem/CBC/UA Results: Firm nodular masses extending down either side of the trachea just distal to the larynx. Non-painful. Normal chest rads; abdominal US submitted for met screen. CBC, chemistries normal, T4 = 11. Aspirate taken and cytopathology pending.

Canine

\*\*This study was limited to the cervix. There is a potential for pathology in organs that were not visualized

**BREED**

**CERVICAL STUDY:**

German Shepherd

The mandibular salivary glands are subjectively normal in size (left: 4.06 x 1.60 cm) (right: 4.47 x 1.63 cm) with smooth curvilinear peripheral contours and homogenous parenchyma.

**SEX**

Neutered Male

The retropharyngeal lymph nodes are also subjectively normal in size (left: 0.43 cm in the transverse plane) (right: 0.64 cm in the transverse plane) with normal curvilinear peripheral contours and homogenous parenchyma.

**AGE**

11 years

The submandibular lymph nodes are subjectively normal in size (left: 0.60 cm cranial / 0.61 cm caudal) (right: 0.40 cranial / 0.45 cm caudal) with relatively normal shape and slightly heterogenous parenchyma.

**Thyroid**

**WEIGHT**

39.2 kg

In the region of the left thyroid lobe, a >3.00 cm irregular, multilobulated, heterogenous, cavitated vascular mass is observed. There is possible vascular invasion. In the region of the right thyroid lobe, a >4.00 cm irregular, heterogenous, cavitated vascular mass is visualized. Smaller hypoechoic nodules are observed just at the distal aspect of the mass. There is no obvious evidence of mass invasion into the trachea.

**INTERPRETED BY**

Andrea Nicastro, DVM,  
Diplomate ACVIM  
(Small Animal Internal  
Medicine)

**ULTRASONOGRAPHIC FINDINGS**

**Findings**

- Bilateral vascular masses in the region of the thyroid gland. Thyroid carcinoma is the top differential with a lower possibility of a non-neoplastic process. There is possible vascular invasion on the left side. Although there is no obvious invasion into the tracheal cartilage, this possibility cannot be definitively ruled out sonographically.

**IMAGING PERFORMED BY**

Nigel Gumley

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Cedarview AH

- Aspiration of the regional lymph nodes is recommended to assess for micrometastatic disease. Consider a cervical CT scan to assess the full extent of disease and to help determine surgical resectability. Consultation with a board-certified oncologist and surgeon are also recommended to formulate a treatment plan.

**REFERRING VET**

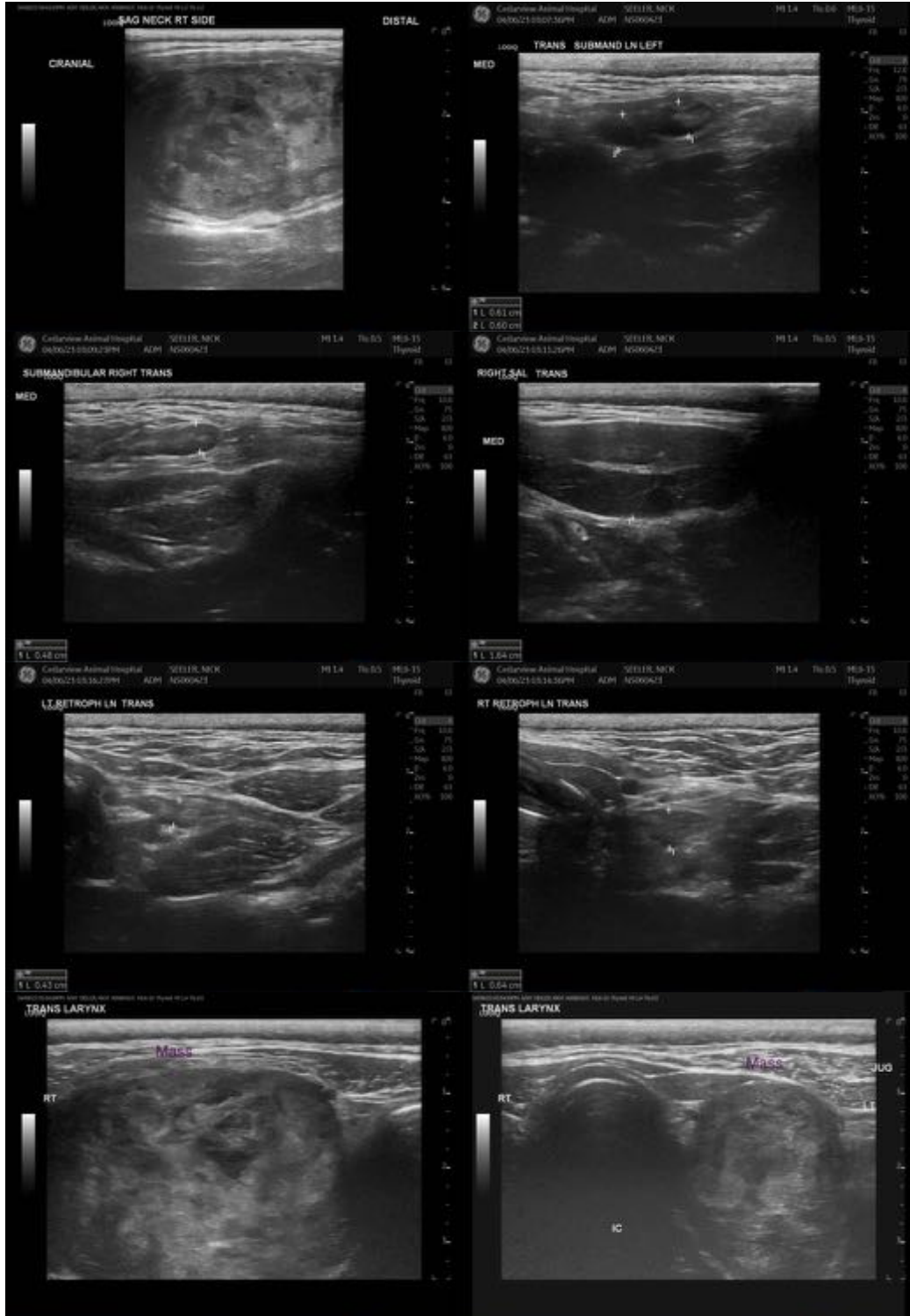
Nigel Gumley

**INVOICE**

12693

**DATE**

4.6.23





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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