**DATE**

12/20/21

PRESENTING CLINICAL SIGNS

History: mass in neck area.
 Current Medications: Cephalexin 250mg 1 BID PO x 10 days
 for skin infection.

PATIENT

Sammy Wiley

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.
 Sedation: Declined. Required for further imaging /sampling.
 Stat Report: Not requested.

SPECIES

Canine

BREED

ShihTzu

SEX

Neutered male

AGE

9/11/15

WEIGHT

17 lbs

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

The region of the left thyroid lobe revealed a parenchymal mass that measured 2.0 x 1.5 cm with surrounding fluid. The mass impinged upon the trachea. This is presumed to be thyroid origin. The mass is undifferentiated without recognizable tissue. The esophagus and salivary glands appear to be free of evident pathology. The mass appears to be encapsulated and potentially resectable. The mass appears to extend medially to what would be the isthmus of the thyroid. The right thyroid appears to have similar heterogenous parenchymal tissue and measures approximately 1.0 x 1.5 cm. Extension of the pathology appears to be entering into the right lobe as well.

ULTRASONOGRAPHIC FINDINGS

Mass in the region of the left thyroid lobe involving the isthmus.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend coagulation panel with 25-gauge FNA of the mass. CT evaluation is warranted for surgical planning. However, local radiation therapy may be appropriate if carcinoma is found on cytology. However, mass in the left cervical region is likely left thyroid lobar origin with suspected extension to the right lobe.

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Rachel Brillhart RDMS

HOSPITAL NAME

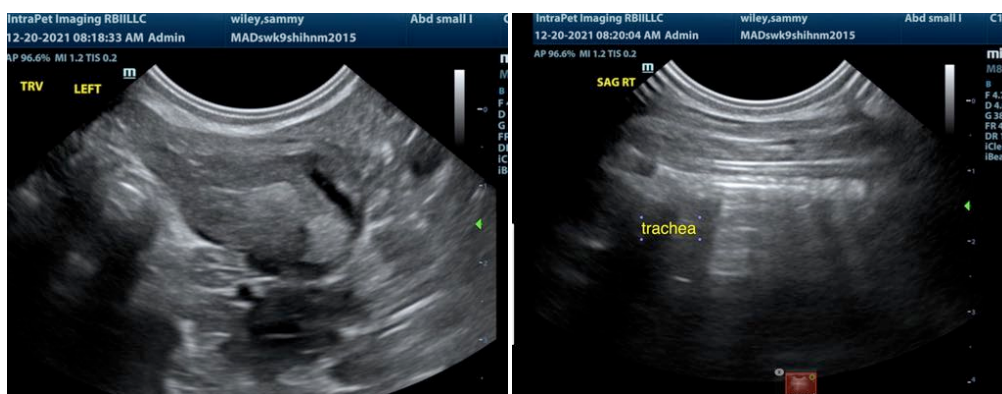
Madonna VC

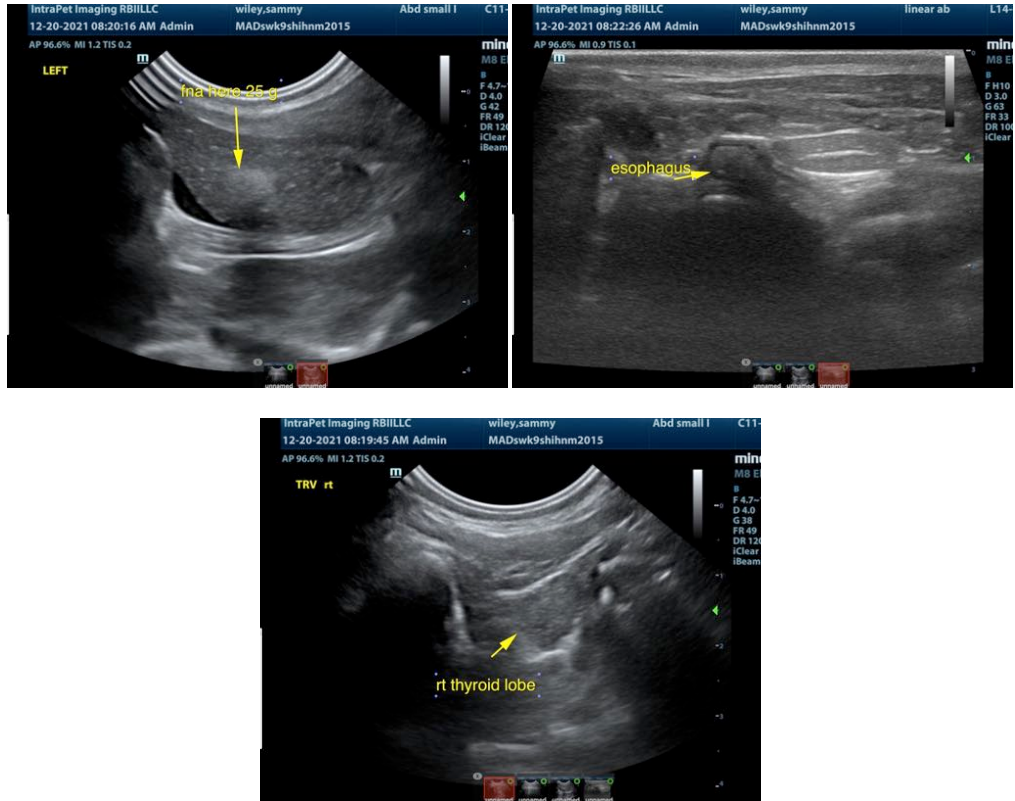
REFERRING VET

Dr. Mason

INVOICE

94738





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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
Eric.Lindquist@SonoPath.com