

DATE

9/9/21

PRESENTING CLINICAL SIGNS

Patient presents for left sided swelling mid neck. Aspirates hemodiluted, non-diagnostic. Labs WNL. Suspect growth is thyroid, concern w thyroid carcinoma. Patient presents for cervical ultrasound and thx rads in prep for possible surgery.

PATIENT

Current Medications: None at this time

Porkchop Calef

Lab Results: see attached- minimal ALT, ALP elevation, total T4 is 2.2

Date of Previous IntraPet Ultrasound: No previous

Sedation: not needed

Stat Report: not requested

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE THYROID

BREED

Dachshund

The left thyroid lobe revealed an expansive, mixed echogenic, undifferentiated mass that was deriving from the mid caudal lobar aspect of the thyroid gland. The left lobar thyroid mass measured 3.16 x 1.81 cm. The mass is highly vascular and appears expansive. Portions of the mass appeared to extend in an irregular fashion caudally and cranially likely invading regional vasculature. This will render resection unlikely. The entire left thyroid lobe measured 3.06 cm. Minor, heterogenous, pericapsular inflammatory pattern was noted.

SEX

Neutered male

AGE

2007

The right lobe was unremarkable and uniform measuring 0.75 x 1.0 cm.

Regional tissues, trachea, esophagus, salivary glands and lymph nodes appeared appear to be unaffected.

WEIGHT

14.13 lbs

ULTRASONOGRAPHIC FINDINGS

Left lobar thyroid mass, highly vascular and strongly consistent with carcinoma. There is concern for regional vascular invasion, possibly resectable.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT evaluation is warranted for potential surgical planning or direct exploratory surgery with potential necessity for debulk and radiation treatment. Ultrasound-guided 25-gauge FNA of the mass can be considered for further definition to confirm the suspicion of carcinoma.

HOSPITAL NAME

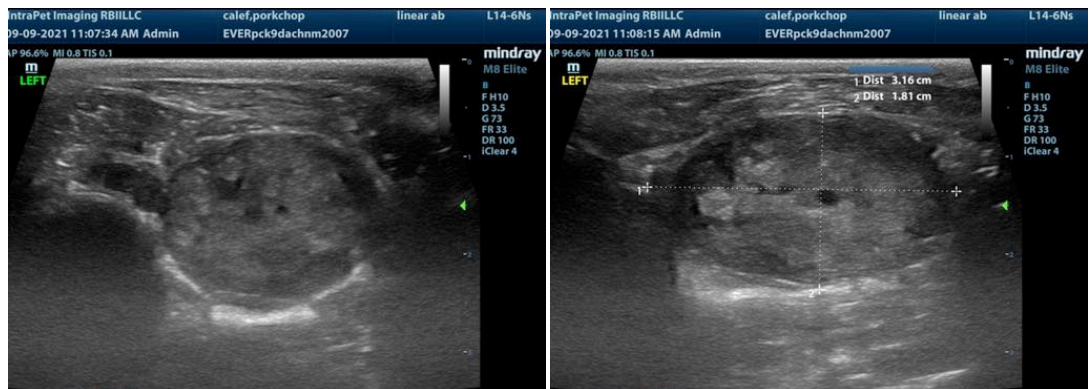
Everhart VH

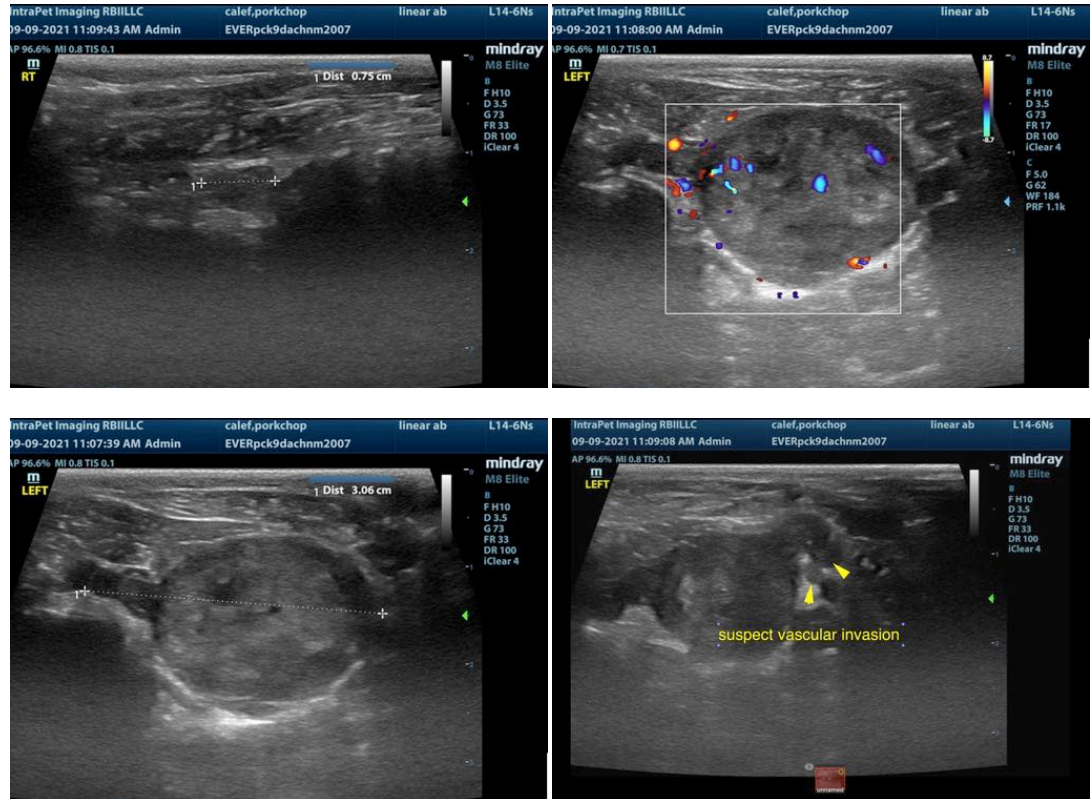
REFERRING VET

Dr. Hayes

INVOICE

91749





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.

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