



PATIENT

Coco Mogitz

SPECIES

Canine

BREED

Boxer

SEX

Female

AGE

12 Years

WEIGHT

48 Pounds

INTERPRETED BY

Heike Rudorf, DVM, Dr.
med. Vet., DipECVDI
DVR

IMAGING PERFORMED BY

Dr. Mucera

HOSPITAL NAME

Animal Clinic Queens

REFERRING VET

Dr. Mucera

INVOICE

35573

DATE

1/23/26

PRESENTING CLINICAL SIGNS

History: Pt has growth in the mouth. Space-occupying mass around incisors

RADIOGRAPHIC STUDY OF THE THORAX, ABDOMEN AND HEAD

The body condition score is 8/9. Cutaneous irregularities with multiple small masses in the inguinal region. Are best seen in left lateral recumbency. In right lateral recumbency this is accompanied by a large round mass.

Bridging spondylosis is present on the LS junction. A small amount of ventral new bone on various endplates is evident.

Thorax

The cranial mediastinum is of physiological width and opacity. The trachea is relatively narrow and displaced ventrally level with the tip of the ET tube. A small esophageal air pocket is located dorsal to it.

The degree of pulmonary expansion is fair at best. The lung lobes extend to the thoracic boundaries. Pulmonary vessels are visible to the secondary branches on the VD view. On both lateral recumbencies bronchi are highlighted.

The cardiac silhouette occupies 85% of the chest height and 3 intercostal spaces. Chamber or outflow tract enlargement is not obvious.

Abdomen

A large amount of retroperitoneal fat is present; the abdominal organs are outlined by fat. Diaphragm and abdominal wall are intact.

The liver is located within the costal arch, and the caudo-ventral lobe is pointed.

The spleen appears physiological.

The stomach contains a small amount of air. Distribution and size of the small intestinal loops appear physiological. Colon and rectum contain a small amount of unformed fecal matter.

The left renal shadow has a physiological size, shape and opacity; the right is obscured by intestinal loops. The bladder is moderately full, and the bladder neck is located cranial to the pubic brim.

The sublumbar region contains a large amount of fat.

Head

A moderately large soft tissue mass distorts the nasal outline on the lateral view. It surrounds the incisor teeth on the VD. The underlying mottled and moth-eaten bone extends into the soft tissue mass level with incisor (I) 1 on the left. I2 and 3 appear to be surrounded by a lucency. On the VD a separate soft tissue mass is adjacent to the left lateral outline of the mass with the mottled bone. The junction between incisor and nasal bones appears more lucent. The epiglottis is calcified; the outline of the hyoid bones is irregular. Multiple ovoid opacities are located ventral to the hyoid apparatus.

RADIOGRAPHIC DIAGNOSIS

Left maxilla



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- Soft tissue masses
- Alveolar bone destruction
- Mottled bony reaction extending into the mass

SPECIES

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Possible mandibular lymphadenomegaly

Irregular hyoid bones

BREED

Boxer

Pulmonary under-expansion

Incidental findings

SEX

Female

- Irregular hyoid bones
- Cutaneous masses, inguinal region
- Inguinal mass
- Tracheal hypoplasia
- Spondylosis
- Obesity

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

48 Pounds

The maxillary soft tissue mass on the left is associated with bone destruction and formation of disorganized bone. Oral neoplasias can be benign or malignant.

Benign tumors in dogs include:

- **Peripheral odontogenic fibroma**
- **Acanthomatous ameloblastomas**
- **Odontoma** (more often in younger dogs)

Malignant tumors include:

- **Squamous cell carcinoma:** most often invade underlying bone.
- **Fibrosarcoma:** often locally aggressive but slow to metastasize.
- **Melanoma:** highly aggressive having usually already spread by the time of diagnosis.
- **Osteosarcoma**

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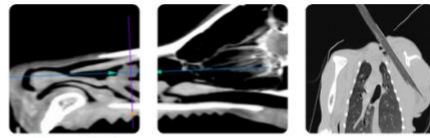
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Due to the appearance of the underlying bone, I feel that a malignant tumor is most likely. However, a biopsy is needed from different aspects of the masses in case one is benign and the other malignant. Palpation of the lymph nodes is recommended in case the tumor has metastasized. If treatment is considered, a CT examination is necessary to identify the exact edges for surgery. Lymph nodes and hyoid apparatus should be included. A thoracic CT is also recommended.

I can see no pulmonary metastases but the masses in the inguinal region require further tests.



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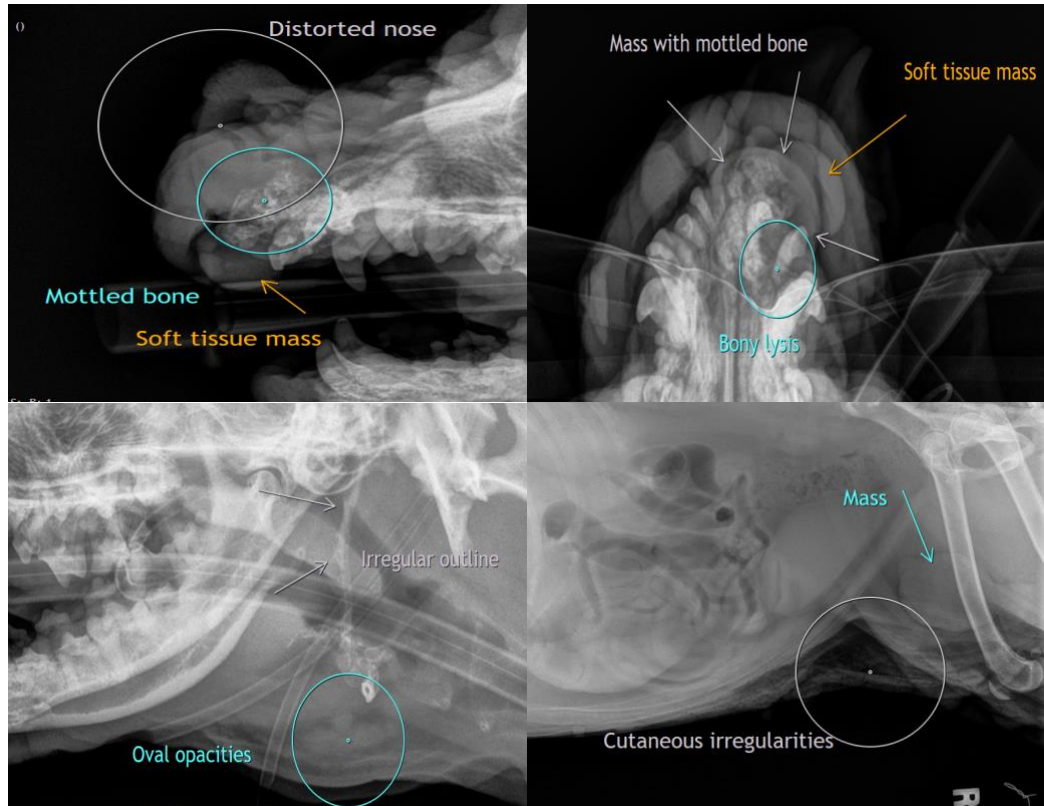
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com