

**PATIENT PRESENTING CLINICAL SIGNS**

Maple Aragon Mass LEFT flank area, feels like a lipoma. Left at end of rib cage, O had FNA which came back poss. mast cell or FB reaction.

**SPECIES**

Canine Abnormal PE/Chem/CBC/UA Results: ABNORMAL Laboratory Findings FNA showed poss. mast cell or FB reaction Current Medications Heartgard Radiographic Findings none taken.

**BREED**

Kelpie

**SEX**

Spayed Female

**AGE**

6.5 yrs

**WEIGHT**

55 lbs

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**IMAGING PERFORMED BY**

Sara Hansen

**HOSPITAL NAME**

Cascade Animal Clinic

**REFERRING VET**

Dr. Rosen

**INVOICE**

10383

**DATE**

8/8/2023

**ULTRASONOGRAPHIC EXAMINATION**

**Other**

Sonographic assessment of the left flank adjacent to within the area of the left caudal rib indistinctly defined non homogenous mildly nodular lesion subjectively caudal to the adjacent rib and subcutaneous measuring approximately 2 cm to 3 cm in diameter was present. No overt evidence of region subcutaneous inflammation or overt subcutaneous edema/free fluid. No other overt subcutaneous abnormalities in the area of the left flank were visualized.

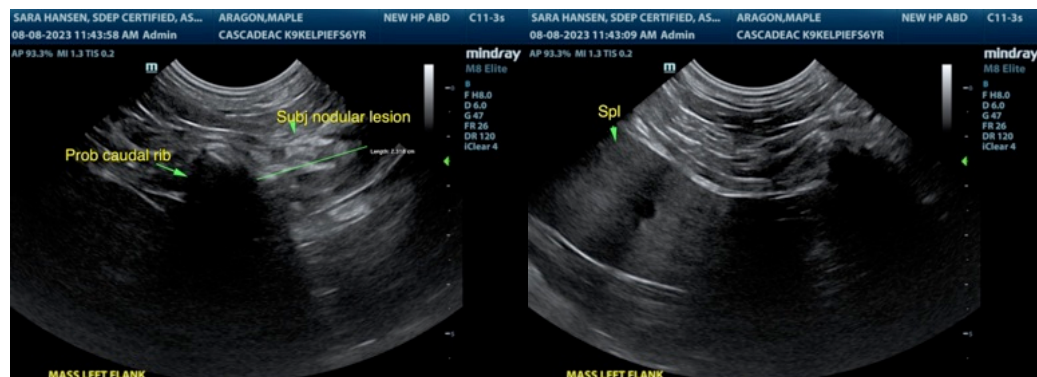
**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

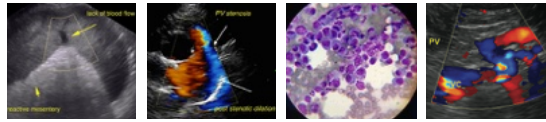
- Indistinctly defined small non homogenous/nodular subcutaneous lesion subjectively adjacent/caudal to caudal left rib.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The indistinct subcutaneous non uniformed nodular lesion is nonspecific with considerations including small nodular lipoma, steatitis, granuloma, non-obvious neoplasia i.e., mast cell tumor given patient history all potentials. Correlation with pending cytology is suggested. Given the small and indistinct presentation of the subcutaneous lesion and pending cytology, biopsy with potential for resection of lesion and concurrent histopathology likely required for definitive diagnosis. No obvious evidence of a subcutaneous foreign body.



The information and recommendations provided are based on the images presented by the referring



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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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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