



**PATIENT**

Toston Mendoza

**PRESENTING CLINICAL SIGNS**

Toston presented Dec 18, 2021 for LF limb lameness due to unknown cause. Toston had been self-mutilating but was treated for skin infection. Owner has noticed improvement in skin/self-mutilating but says lameness is getting worse and sometimes has bouts of vocalizing as if in pain. There is moderate to severe loss muscle tone. It was talked to owner about possible amputation. Abnormal PE/Chem/CBC/UA Results: CBC --- unremarkable CHEM --- unremarkable

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE NECK & BRACHIAL PLEXUS REGION**

**BREED**

Severe atrophy of the left front limb musculature is noted.

Mixed Small-Medium Breed

There is a large lobulated cavitating mass extending from the axillary region along the medial side of the left proximal front limb and into the thorax via the cranial thoracic aperture. Focal mineralization is seen in the mass. A craniodorsal mediastinal mass effect is present owing to the intrathoracic extension of the mass. The mass measures approximately 10.0 cm in length and 3.0 cm in diameter. The mass extends into the vertebral canal through the left sided neuroforamina C7/T1 and C6/7 where an intradural extramedullary mass effect onto the spinal cord is seen.

**SEX**

M

The left axillary lymph node is severely enlarged, rounded, and presents heterogeneous contrast enhancement.

**AGE**

5 Years

The right axillary lymph node, cervical lymph nodes, and medial retropharyngeal lymph nodes present mild symmetric enlargement.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

The lung is included in the study and presents multiple soft tissue attenuating interstitial nodules.

Multifocal subcutaneous nodules are seen in the thoracic wall.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**HOSPITAL NAME**

Veterinary Image Center

- Malignant left sided brachial plexus neoplasia with extension into the vertebral canal.
- Pulmonary metastatic disease.
- Presumed metastatic disease to the left axillary lymph node.
- Possible additional metastatic disease to more regional lymph nodes.
- Severe neurogenic atrophy of the left front limb musculature.

**REFERRING VET**

Dr. M. Fernández, DVM

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT findings are compatible with malignant neoplasia in the brachial plexus with extension into the thorax and vertebral canal where compressive myelopathy is seen. The findings furthermore support presence of metastatic disease to the regional lymph nodes and lung. Neurofibrosarcoma or other peripheral nerve sheath tumor is considered most likely; however, round cell neoplasia or other cannot be ruled out entirely.

**INVOICE**

49679

**DATE**

1-19-22



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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.

**SPECIES**

Canine

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.

**BREED**

Mixed Small-Medium  
Breed

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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**AGE**

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