



PATIENT PRESENTING CLINICAL SIGNS

Callie Vila There is a over 6cm irregular, high vascular mass in the L and R thyroid gland (Ultrasound finding). Aspirate showed endocrine/neurocrine neoplasm. Hx of hypercalcemia For surgical planning
 Abnormal PE/Chem/CBC/UA Results: Mono: 1209 Chem: ALKP: 395 Tbil: 0.4 Calc: 12.9 Na: 155
 PSL: 239 cpk: 1481 T4: 0.6 UA: SG: 1.012 Protein: 2+ Ionized Cal: 1.68 Calc: 13.8 PTH: 10.40

SPECIES

Canine **COMPUTED TOMOGRAPHIC STUDY OF THE NECK & THORAX**

Plain and post contrast studies of the neck and post contrast study of the thorax available for review.

BREED

COMPUTED TOMOGRAPHIC FINDINGS

Rat Terrier

Neck

SEX

Bilateral thyroid lobe enlargement is noted.

SF

A mass of approximately 6 x 2 cm is emerging from the right lobe of the thyroid gland. Severe nonuniform contrast enhancement with multiple intralesional cavitations is noted. There is no evidence of infiltration of the peripheral soft tissues and no significant mass effect is noted onto the trachea at this point.

AGE

11 Years

The right medial retropharyngeal lymph node presents mild symmetric enlargement.

Mild nodular enlargement of the cranial pole of the left lobe of the thyroid gland is noted with slightly nonuniform contrast enhancement. Maximum diameter of the cranial pole of the left thyroid lobe is 10mm.

INTERPRETED BY

Nele Eley (Ondreka),
 DVM Dr. med. vet.,
 DipECVDI

The left medial retropharyngeal lymph node presents within normal limits.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

HOSPITAL NAME

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The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

REFERRING VET

Xavier Meaux

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

INVOICE

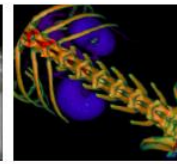
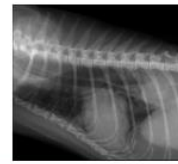
56481

The lung parenchyma presents the expected architecture and attenuation behavior. No evidence of pulmonary nodules or masses is seen.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

DATE

1-31-23


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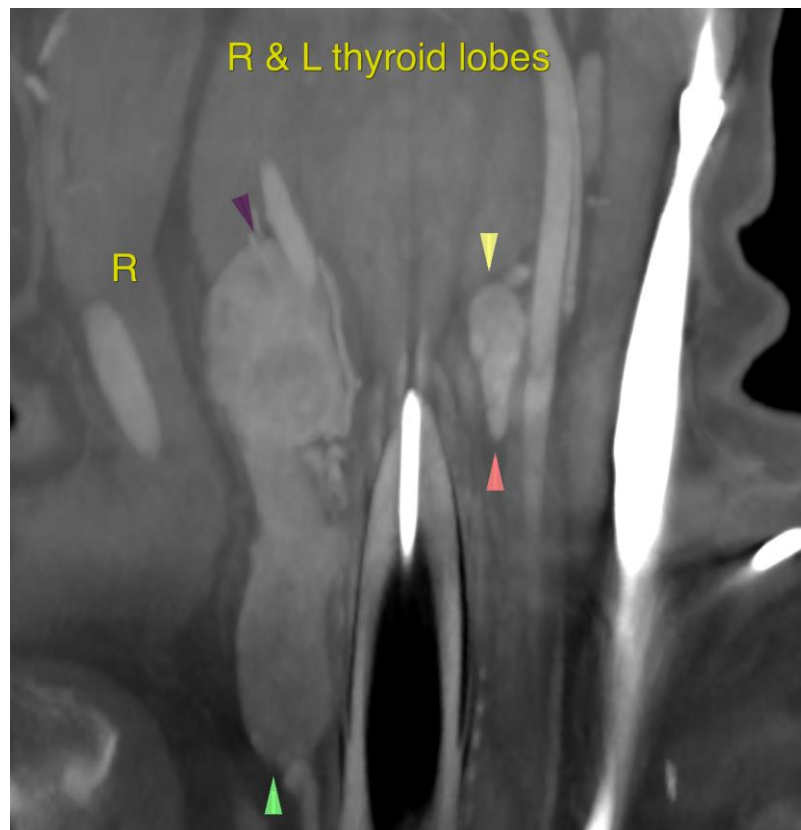
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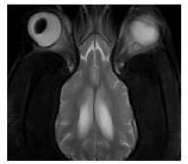
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral thyroid lobe enlargement with mass like character on the right side and nodular appearance on the left side.
- Mild right medial retropharyngeal lymphadenomegaly.
- Normal CT findings of the thorax with no evidence of pulmonary metastases and no evidence of mediastinal lymphadenomegaly.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a mass of the right thyroid lobe. Differential diagnosis includes adenoma and adenocarcinoma primarily. The nodular enlargement of the cranial pole of the left thyroid lobe may reflect bilateral adenoma/adenocarcinoma. However, based on the appearance and position of the nodular changes, left cranial parathyroid adenoma or less likely hyperplasia appears to be a high potential too.





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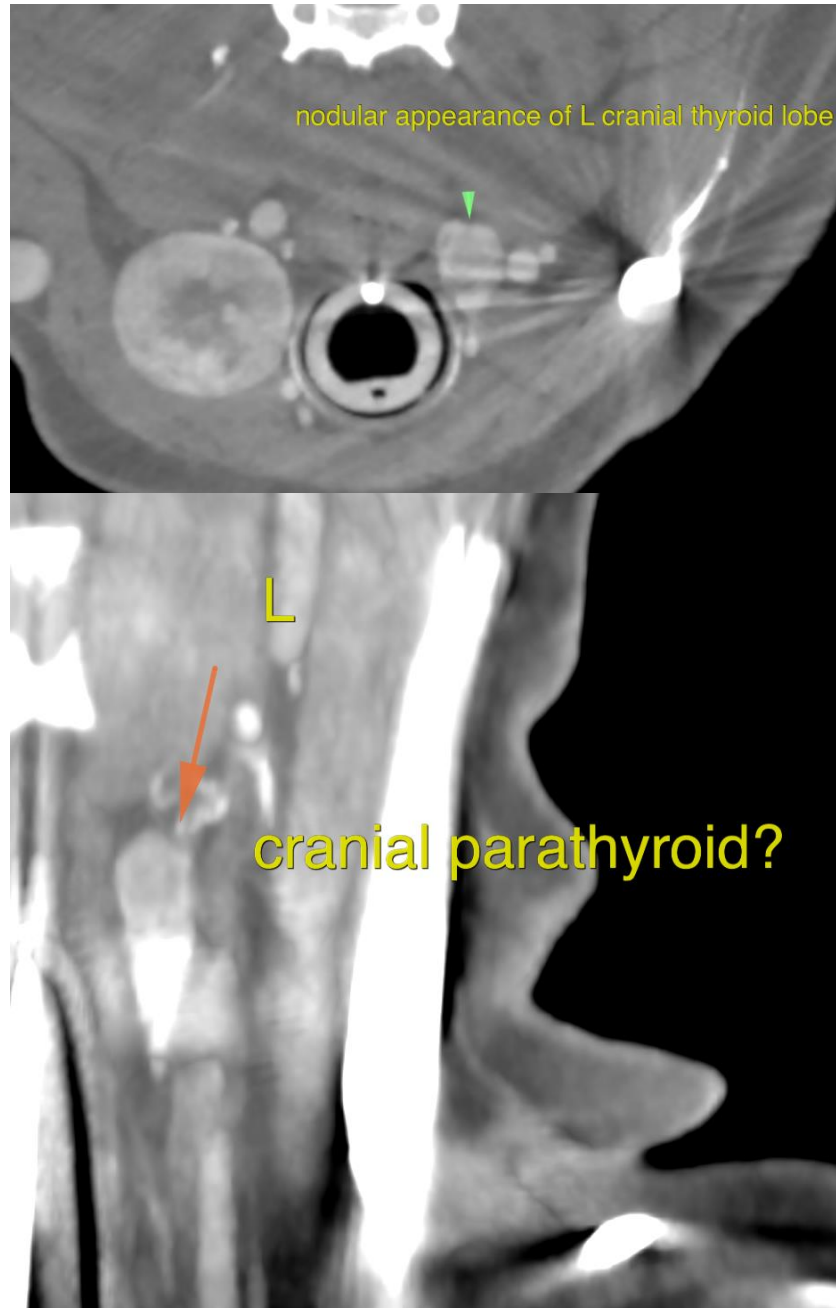
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PATIENT The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Callie Vila

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.

SPECIES

Canine

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