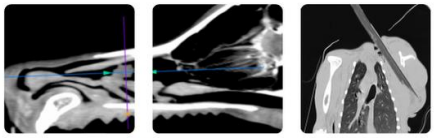

PATIENT

Leo Filippone

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10

WEIGHT

32

INTERPRETED BY

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

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center - Oceanside

REFERRING VET

Kam

INVOICE

72844

DATE

12-3-25

PRESENTING CLINICAL SIGNS

15x20 cm firm mass on right axillary region was noted.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals a 12 x 12 x 7 cm sized fat attenuating mass in the right lateral thoracic wall extending into the axillary region. The lesion is uniformly fat attenuating, lobulated, and nonenhancing. I'll defined borders are noted, though there is no invasion into the thoracic cavity and no evidence of infiltration into the surrounding musculature.

The regional lymph nodes present within normal limits.

The patient is noted to have an elevated body condition score.

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.

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large subcutaneous thoracic wall lipoma with axillary extension.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings are consistent with a benign subcutaneous lipoma. The size and ill-defined margins extending into the axilla may make complete surgical excision challenging, particularly for achieving clean margins and avoiding recurrence. No evidence of invasion into the thoracic cavity or underlying structures is present. Surgical excision is feasible; careful planning is required. Safety margins should be considered owing to the unclear margination. Maintain awareness of body condition score management.

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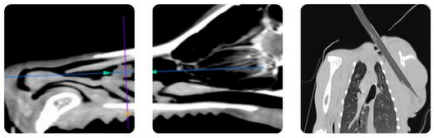

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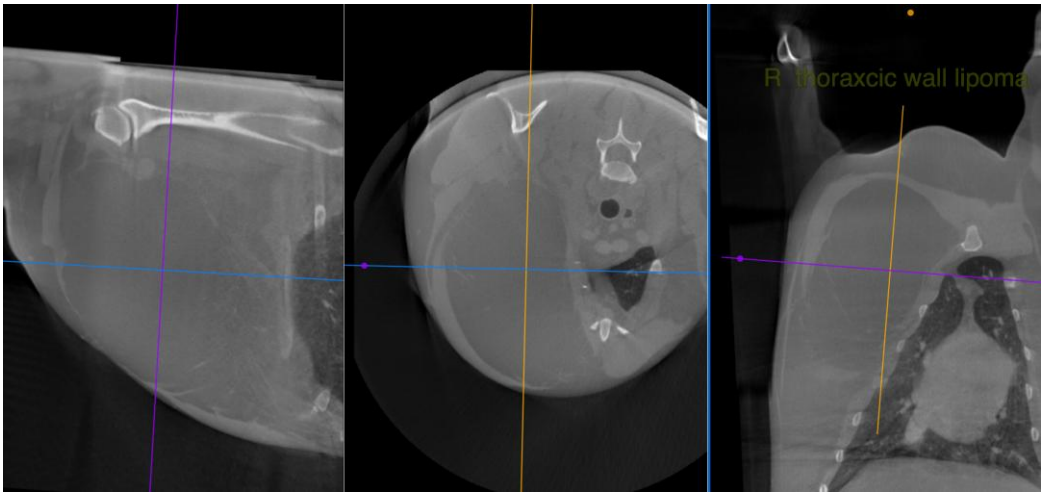

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
info@sonopath.com