

PATIENT PRESENTING CLINICAL SIGNS

Hazel Rosario Patient came to the evaluation of firm mass in right scapula region. Surgeon recommended CT Scan for surgical planning.

SPECIES Abnormal PE/Chem/CBC/UA Results: CBC --- NEU mild increased CHEM --- GLOB mild increased

Canine **COMPUTED TOMOGRAPHIC STUDY OF THE THORAX**

Plain and post-contrast studies available for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Mixed A large, ill-defined, soft tissue attenuating mass of approximately 7.0 cm x 5.0 cm x 5.0 cm is seen in the right lateral thoracic wall. Part of the mass is situated within the caudal aspect of the infraspinatus fossa of the shoulder blade. Most of the mass extends further caudal to the shoulder blade within the thoracic wall. No evidence of aggressive osteolytic changes. However, the mass presents strong non-uniform contrast enhancement with multifocal large intralesional cavitations, and the lesion margins to the surrounding musculature including the infraspinatus, supraspinatus, and latissimus muscles are ill-defined.

SEX

Spayed Female

AGE

8 Years

The right axillary lymph node presents mild symmetric enlargement.

No evidence of interstitial pulmonary nodules or masses is seen.

The mediastinal lymph nodes present within normal limits.

INTERPRETED BY

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large, cavitated soft tissue mass in the right thoracic wall with presumed aggressive biological behavior.
- Mild right axillary lymphadenomegaly
- No evidence of pulmonary metastasis

HOSPITAL NAME

Veterinary Image
Center

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. J Colon

The CT study reveals a large expansile, cavitated soft tissue mass in the right thoracic wall. The findings are compatible with soft tissue neoplasia. Soft tissue sarcoma is considered a primary differential diagnosis. There is no evidence of involvement of the underlying bones. However, there appears to be infiltration of the surrounding musculature. The distance between the mass and the parietal pleura is <5.0 mm. The mass is in direct contact with the shoulder blade.

INVOICE

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The findings of the right axillary lymph node are equivocal for reactive hyperplasia versus early metastatic disease. Fine needle aspiration could be considered for further definition.

DATE

4/20/23



PATIENT

Hazel Rosario

SPECIES

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BREED

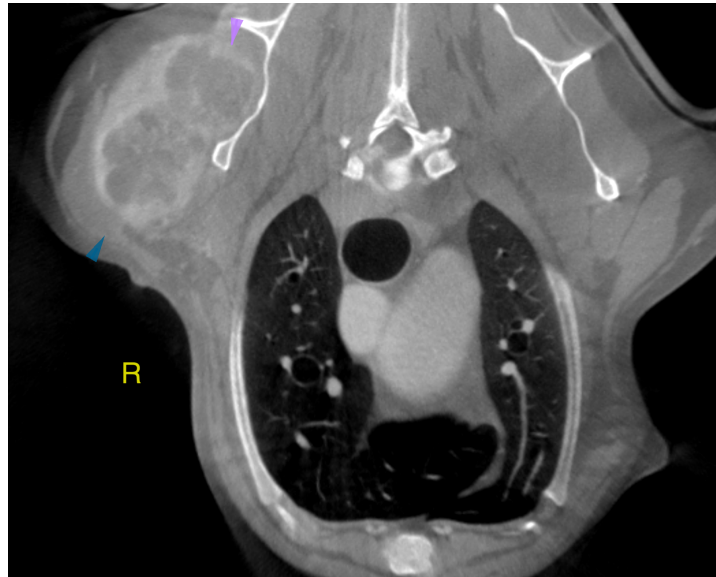
Mixed

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INTERPRETED BY

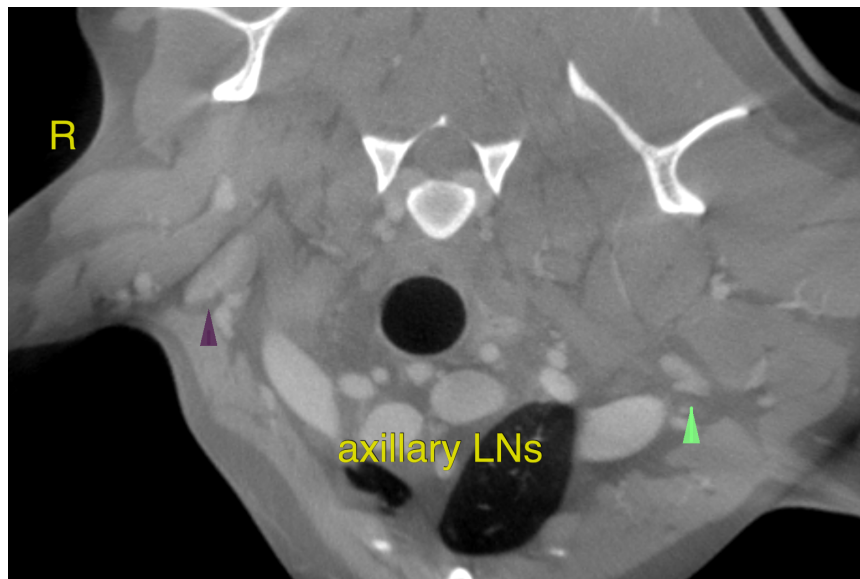
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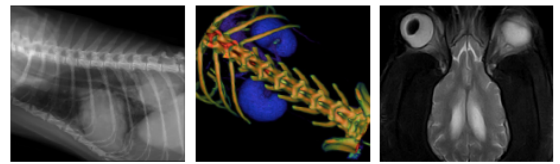


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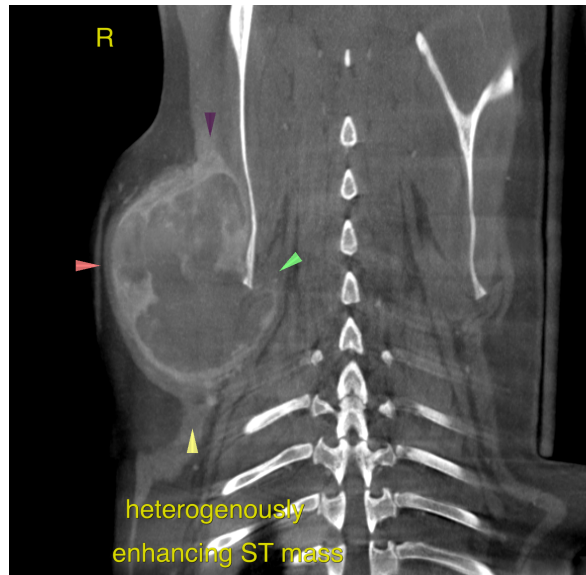
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

INTERPRETED BY

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DipECVDI

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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