



PATIENT

Jimmy Joe Phillips

SPECIES

Canine

BREED

Husky

SEX

Neutered Male

AGE

13Y, 8M

WEIGHT

40.9kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Jordan M.

HOSPITAL NAME

CARE Surgery Center

REFERRING VET

Dr. Seth Bleakley

INVOICE

74705

DATE

4-21-26

PRESENTING CLINICAL SIGNS

Recurrence of left axillary mass. The previous histopathology was a lipoma with central necrosis.

Differentials include:

- Lipoma recurrence.
- Malignant transformation to a liposarcoma.

The mass is causing pressure on the lymphatics, leading to distal limb edema, and is causing discomfort resulting in lameness.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

A very large, approximately 17 x 13 x 17 cm size, lobulated, poorly margined, soft tissue mass is arising within the left axillary region. The lesion demonstrates mixed fat and soft tissue attenuation with heterogeneous contrast enhancement. The mass extends dorsally along the subscapular region medially with early extension toward the cranial mediastinum and left craniolateral thoracic wall without definitive intrathoracic invasion. Marked regional mass effect on the trachea and deep vasculature of the neck is seen consistent with compression of lymphatic drainage pathways. No definitive evidence of aggressive osteolysis of adjacent skeletal structures is identified at this point.

The lungs present no evidence of pulmonary nodules, masses, or infiltrates.

The heart and mediastinum present within normal limits. No evidence of mediastinal lymphadenopathy is detected.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large infiltrative soft tissue mass in the left axillary region with fat and soft tissue components.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging appearance is not consistent with a simple encapsulated lipoma. Most likely differentials include infiltrative lipoma and liposarcoma, so there is a strong concern for either recurrent infiltrative lipoma or malignant transformation to liposarcoma. Imaging alone cannot reliably distinguish between these entities. Repetition of tissue sampling can be considered by means of incisional biopsy or multiple core biopsies. Surgical planning should entail wide excision given the infiltrative behavior and clinical impact. Prognosis is guarded depending on histopathologic diagnosis and resectability.



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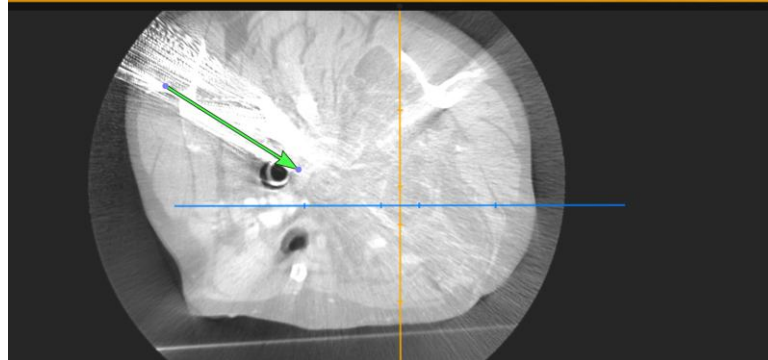
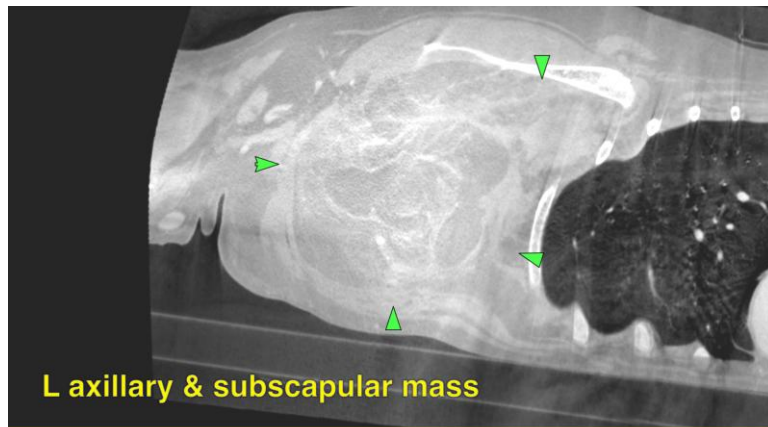
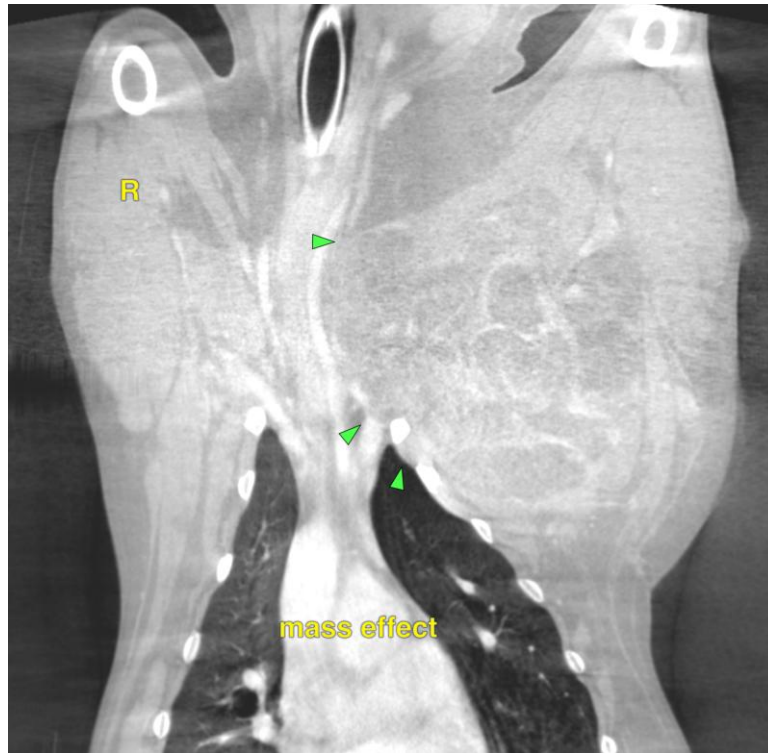
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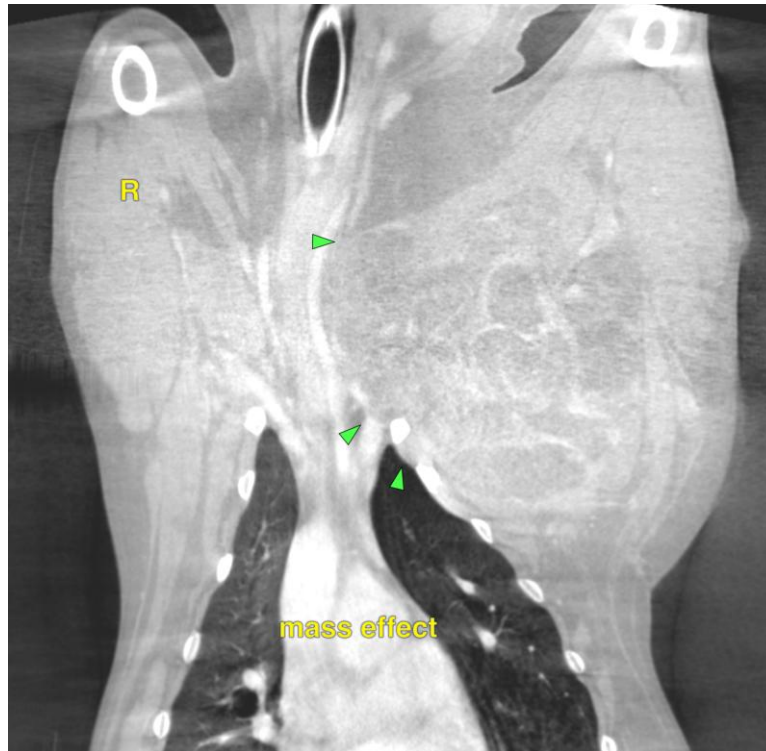
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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