



**PATIENT**

Margie Brown

**SPECIES**

Canine

**BREED**

Redbone Coonhound

**SEX**

Female Spayed

**AGE**

10 Years, 7 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Catskill Veterinary  
Services, PLLC

**REFERRING VET**

Dr. Daniela Carbone

**INVOICE**

57992

**DATE**

4-25-23

**PRESENTING CLINICAL SIGNS**

Tumors present on entirety of body, most concerned for tumor on neck. Abnormal PE/Chem/CBC/UA Results: -Cytology performed on mass in neck- Suspect thyroid neoplasia, with a possible cystic component or chronic intralesional hemorrhage. -Chronically elevated ALP/ALT, concern for Cushing's disease, have not performed further work up at this time.

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, NECK, THORAX, & ABDOMEN**

Plain study of the thorax and plain and post contrast studies head, neck, and abdomen available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**Head & Neck**

A large expansile soft tissue attenuating mass of approximately 4 x 3 x 2.5cm is seen rostroventral to the larynx. The mass presents aggressive osteolysis of the basihyoid bone. Severe heterogeneous contrast enhancement is noted. Lesion margins are poorly defined.

The submandibular, medial retropharyngeal, and cervical lymph nodes present within normal limits.

Both lobes of the thyroid gland are seen and present within normal limits.

Dental plaques are noted.

The brain and pituitary gland present within normal limits.

**Thorax**

Mild T5/6 spondylosis deformans is noted.

The patient's body condition score is excessive.

Multiple subcutaneous and intermuscular lipomas of variable size are seen within the head, neck, and thoracic and abdominal walls.

There is no evidence of pulmonary metastases.

The mediastinal lymph nodes present within normal limits.

No direct signs of cardiovascular pathology are seen.

**Abdomen**

Multiple variably sized, poorly, and moderately enhancing nodules are seen throughout the parenchyma of all liver lobes. The gallbladder and portal lymph nodes present within normal limits.



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Mild generalized and nodular enlargement of the pancreas is noted.

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The adrenal glands and kidneys present within normal limits.

Occasional hyperenhancing splenic nodules are seen.

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Moderate coxofemoral joint osteoarthritis secondary to hip dysplasia is seen.

Canine

Mild spondylosis deformans is noted at T13/L1.

**BREED**

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

Redbone Coonhound

- Soft tissue mass in the ventral upper neck with aggressive osteolysis of the basihyoid bone.
- No evidence of regional lymph node metastases.
- Multiple heterogeneously enhancing nodules within the liver.
- Normal age related lung.
- Pancreatopathy: benign nodular hyperplasia versus chronic pancreatitis.
- Splenic nodules.
- Bilateral coxofemoral joint osteoarthritis.
- Spondyloses.
- Obesity
- Multiple subcutaneous and muscular lipomas.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT findings are highly suggestive for ectopic thyroid neoplasia. Carcinoma is considered likely based on the aggressive biological behavior. Other malignancies such as fibrosarcoma, chondrosarcoma, and osteosarcoma cannot be ruled out entirely as differential diagnoses. T4 levels should be checked if not performed already.

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There is no evidence of metastatic disease to the regional lymph nodes or lung.

Note the presence of multiple variably enhancing liver nodules. The findings are suggestive for hepatic neoplasia such as metastases, multiple hepatocellular carcinoma, adenoma, biliary cyst adenoma, liver sarcoma, round cell neoplasia, and other. Sampling is recommended for further definition.

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There was no evidence of pituitary gland enlargement or adrenal gland enlargement.

The finding of the pancreas suggest presence of benign age related nodular hyperplasia versus pancreatitis.

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The splenic nodules are likely to represent lymphoid hyperplasia or extramedullary hematopoiesis. Metastatic disease cannot be ruled out entirely. Fine needle aspiration could be considered for further definition.

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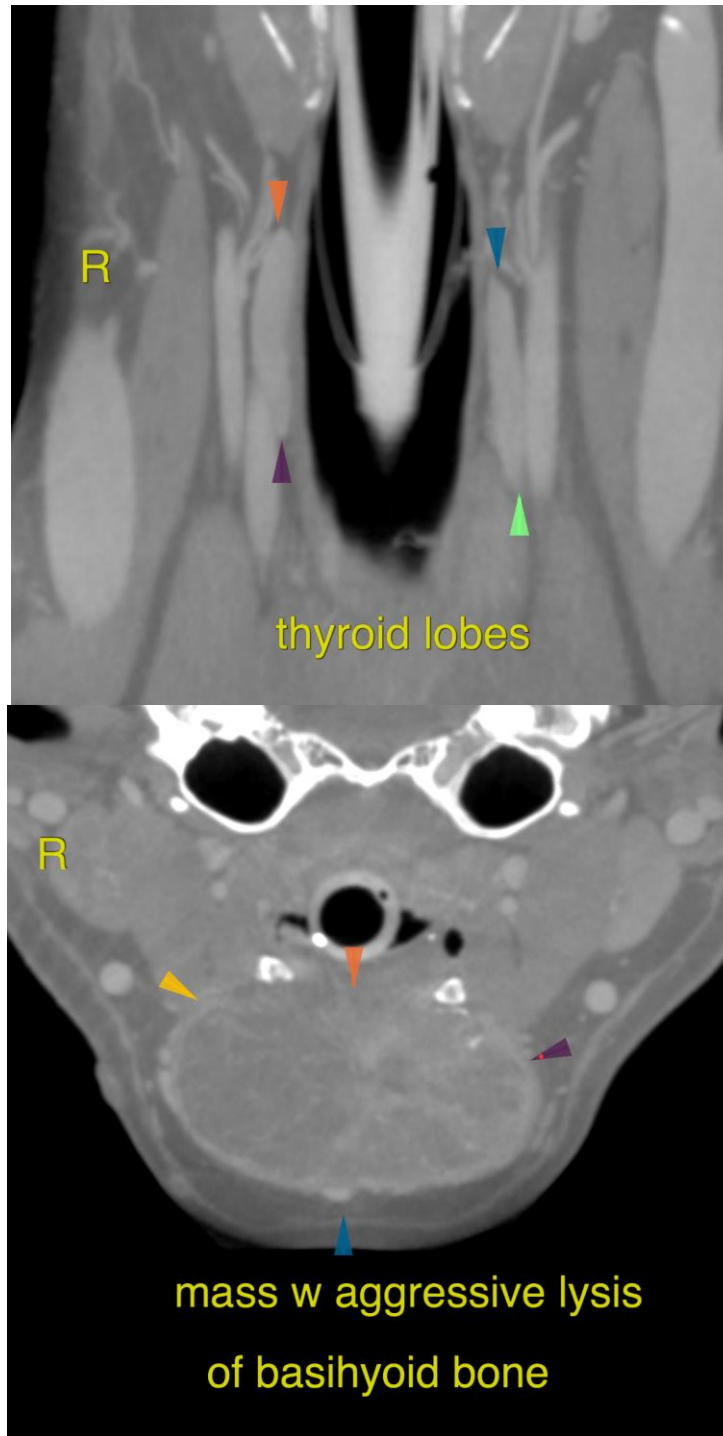
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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