



PATIENT

Sophie Isabelle

PRESENTING CLINICAL SIGNS

Presented for stertor- r/o BOAS components, epiglottic retroversion, mass, lar-par, inflammatory, other. Once sedated, a 3cm growth was found on the left ventral tongue. CT still performed to check for lymph node enlargement.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: ALP elevated - 213 Hx of microvascular dysplasia
Hyperkeratosis of nasal planum Stertor

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

BREED

Shar Pei

Plain and post contrast studies available for review.

SEX

Female Spayed

COMPUTED TOMOGRAPHIC FINDINGS

A large irregular shaped and ill-defined approximately 4 cm sized soft tissue attenuating mass is emerging from the left ventral aspect of the body of the tongue. The mass appears to have a pedunculated connection with the body of the tongue. Nonuniform contrast enhancement is seen within the mass. The lesion margins are ill-defined.

AGE

5 Years, 9 Months

The left medial retropharyngeal lymph node presents moderate symmetric enlargement.

The upper cervical esophagus is mildly dilated and contains a mild amount of fluid.

Thickening of the soft tissues of the nares is seen. There is no abnormality noted within the nasal cavities or paranasal sinuses.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The larynx presents within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large soft tissue mass of the body of the tongue meeting neoplastic criteria.
- Moderate left medial retropharyngeal lymphadenomegaly.
- Esophageal dilation with gastroesophageal reflux – likely related to general anesthesia.

HOSPITAL NAME

CARE Surgery Center

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Keats

The CT study reveals a large soft tissue mass emerging from the body of the tongue meeting neoplastic criteria. Squamous cell carcinoma, other carcinoma, melanoma, and other neoplasia are potential differential diagnoses. The findings are not compatible with an inflammatory/ infectious lesion. Final diagnosis will require sampling for cytology or histology. Consider also fine needle aspiration of the left medial retropharyngeal lymph node in order to rule out early metastatic disease. The CT findings of the medial retropharyngeal lymph node are equivocal for reactive hyperplasia versus early metastases.

INVOICE

58953

DATE

6-20-23



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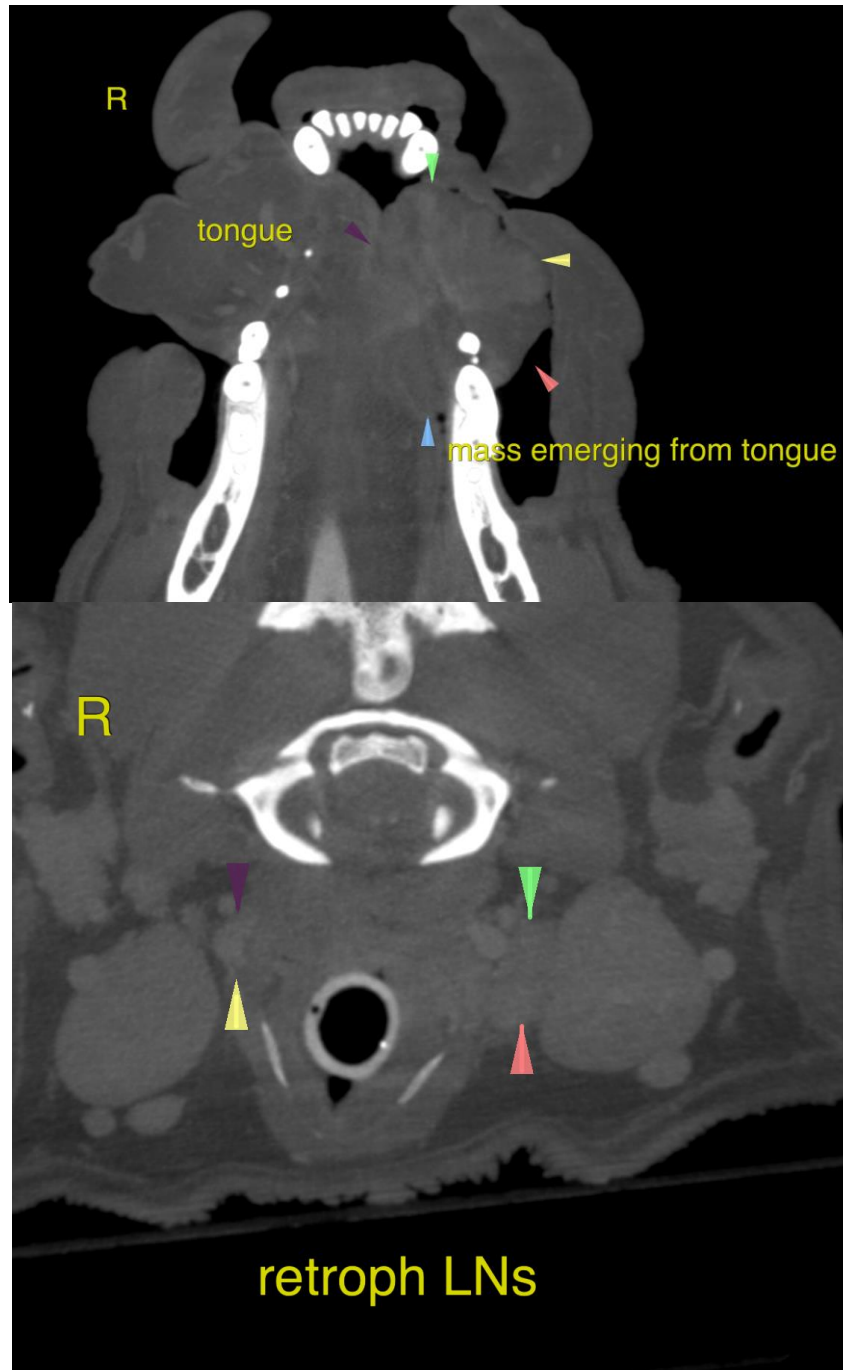
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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