



PATIENT PRESENTING CLINICAL SIGNS

Echo Matlock 6 days ago pt began to act lethargic. One day later, some strange lumps showed up on the left side of her neck and along ventral midline. The next day she came in for an exam and bloodwork. Aspirate did not yield any cells/fluid. We started cefpodoxime and carprofen and sent home. Then she started to develop pitting edema down the left front leg, so today we performed the CT (looking for FB, penetrating wounds, abnormal lymph nodes) and took tissue samples of the swellings for histopath and tissue culture. Abnormal PE/Chem/CBC/UA Results: Mildly elevated neutrophils, otherwise unremarkable labwork.

SPECIES BREED COMPUTED TOMOGRAPHIC STUDY OF THE NECK, CRANIAL MEDIASTINUM, LEFT AXILLARY REGION, AND LEFT FRONT LIMB

Canine
German Shepherd

Plain study available for review.

SEX COMPUTED TOMOGRAPHIC FINDINGS

FS

Extensive soft tissue thickening with fluid accumulation and fat stranding is seen subcutaneously and interfascially in the ventral neck, left armpit, and entire visible left front limb. The changes in the ventral neck are mostly to the left of the midline. There is no evidence of perforating injury with gas accumulation/emphysema and no foreign material can be identified. There is no evidence of extension of the changes into the cranial mediastinum. A cavitory lesion is not seen however, assessment of which is limited to the availability of a plain study only.

AGE

5 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The left medial retropharyngeal, cervical, and axillary lymph nodes are moderately enlarged. The pattern of enlargement is symmetric.

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

HOSPITAL NAME

Animal Health Care
Denver

The visible trachea and esophagus present within normal limits.

Mild spondylosis deformans is present within the cervical spine and presumed to be unrelated to the reason of clinical presentation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Cathryn Sayer

- Suspect extensive cellulitis in the left ventral neck, left axillary region, and left front limb.
- Regional lymphadenomegaly of the left retropharyngeal, axillary, and cervical lymph nodes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

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The cause of the cellulitis / edema remains unclear. No foreign material is seen yet perforating stick injury, bite injury, or migrating foreign material are most likely the underlying causes of the CT findings. Hydrostatic edema, lymphedema, hematoma all appear less likely. I cannot delineate a cavitory lesion, however, the assessment is limited unfortunately without the post-contrast study.

DATE

7-21-22

The changes of the lymph nodes suggest presence of lymphadenitis. Round cell neoplasia or other neoplastic infiltrate could be ruled out by means of fine needle aspiration.



PATIENT

Echo Matlock

SPECIES

Canine

BREED

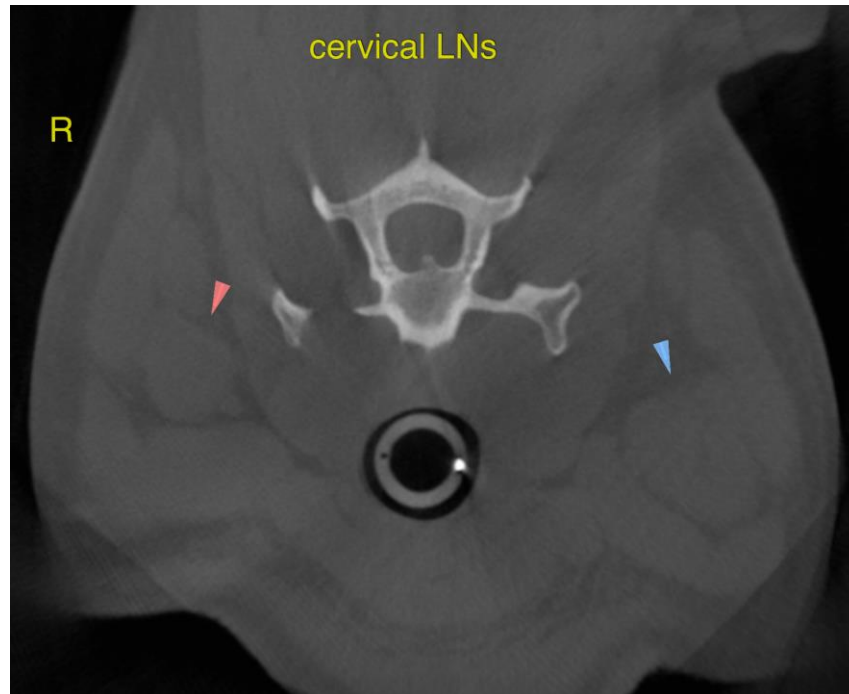
German Shepherd

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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.

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

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