



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Kobe Kang/Singh
SPECIES Canine
BREED Schnoodle
SEX Neutered Male
AGE 10 Years

History: Presented to the Toronto Animal Health Partners Surgery Service for a rapidly growing (doubled in size over 3 month period), firm, non-mobile mass on his right shoulder (10-15 cm) first noticed in March 2023. Fine needle aspirates were inconclusive. Following FNAs, severe bruising was noted over the mass. The swelling has improved since and the mass has flattened a little but has not increased in size. Over the last few months, he has to urinate more frequently and appears very lethargic. He has accidents in the house and has to be let out of the house every two hours to urinate. Over the past week, he has become hesitant to jump up and down onto surfaces. His appetite has been normal. Kobe has had a previous history of increased urination, elevated ALP (no LDDST performed), hypothyroidism (diagnosed 3 months ago), arthritis, Schnauzer Comedo Syndrome, lipoma removals (abdomen and armpit). While we were performing CT today (June 16), possible bladder mass also seen on the scan by Dr. Reynolds.

Abnormal PE/Chem/CBC/UA Results: May 13, 2023 CBC - mild thrombocytosis 535 (143-448), otherwise normal Chem - moderately elevated ALP 612 (5-160), mild hypercholesterolemia 12.1 (3.4-8.9), moderate hypertriglyceridemia 7.34 (0.23-1.71), moderately elevated lipase 405 (0-250) and a mildly elevated CK 210 (10-200), otherwise normal TT4 21.9 (13-53) 4DX Negative Urinalysis (freecatch) - SG 1.030, pH 8.5, trace blood, triple phosphate crystals, otherwise nsf May 26, 2023 FNA Cytology Report of shoulder mass: All slides contain a large amount of blood with a small amount of free lipid and rare adipocytes. Scattered lysed cells are observed. Low numbers of intact macrophages and very rare reactive fibroblasts are observed. Rare neutrophils are likely from blood. June 16 2023 Soft Immobile mass over right shoulder - 4 x 4 inches Multiple small lipomas

INTERPRETED BY COMPUTED TOMOGRAPHIC STUDY OF THE CHEST & ABDOMEN

Sebastian Jawinski,
 German Board
 Certified Vet Specialist
 in Diagnostic Imaging

Chest

The lungs are regularly ventilated with close contact to the inner thoracic wall on all sides. There is no evidence of pleural thickening, fluid accumulation or free pleural gas. Pulmonary density is within normal limits, there is no evidence of focal or nodular pulmonary lesions.

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The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. The thoracic trachea and esophagus present as expected. The heart is inconspicuous as far as can be assessed with CT. The diaphragm appears normal.

REFERRING VET

Dr. Debbie Reynolds

The extra-thoracic soft tissues present a sub-fascial mass caudal to the right scapula with diameters of 5.5 x 2.4 cm still being well-defined and confluent with the fascial musculature. The inner texture is inhomogeneous and presents an irregular contrast uptake. The fascial musculature appears thickened. Borders to the adjacent fat tissue and the ribs are intact and respected without signs of a lytic lesion or periosteal reactions. The superficial cervical and axillar lymph node are correspondently mildly enlarged and rounded in shape.

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Abdomen

DATE

6/16/23



PATIENT The caudal bladder and cysto-urethral junction impress with an irregular mass including the sphincter area and the cranial urethra. The mass shows spot-like calcifications with diameters of 3.4 x 2.1 cm. The correspondent medial iliac lymph nodes are inconspicuous.

Kobe Kang/Singh

SPECIES A small hypodense and round hepatic lesion is noted in the right lateral liver. The liver shows normal findings apart from that. A small amount of hyperdense sludge is recognized in the gallbladder without evidence of cholestasis. The common bile duct is considered to be normal.

Canine

The pancreas presents normal size and shape with a smooth surface. The peripancreatic fat tissue and omentum are inconspicuous.

BREED

Schnoodle

The spleen shows normal findings in terms of size, surface, shape and contrast behavior. Unremarkable presentation of the bilaterally symmetrical kidneys. Adrenal glands are in normal limits.

SEX

Neutered Male

As far as can be assessed, the stomach and all parts of intestine are regularly presented without any indication of a wall thickening or a mass. There are no signs of an obstructive or functional ileus. Abdominal lymph nodes and abdominal vessels have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

AGE

10 Years

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Sub-fascial mass caudal to the right scapula
- Mild lymph adenomegaly right superficial cervical and axillar lymph node
- Suspected neoplastic lesion of the urinary bladder/cranial urethra
- Normal findings of the thorax
- Small hypodense hepatic lesion and hyperdense biliary sludge gallbladder as incidental findings

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings of the bladder und urethra are highly suspicious for a malignant and neoplastic process as typically seen with transitional cell carcinoma. Regional or distant metastases are not detected. Additional/complementary ultrasound could be performed next.

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The size, shape, density and contrast behavior of the sub-fascial mass are furthermore suspicious for a malignant neoplastic lesion. The fascial musculature could be the origin. An inflammatory lesion (granuloma, abscess formation) is very unlikely. Lipoma is not a differential. The enlargement and rounding of the regional lymph nodes can be a sign of regional metastatic spread. Resection should be performed in case of surgery.

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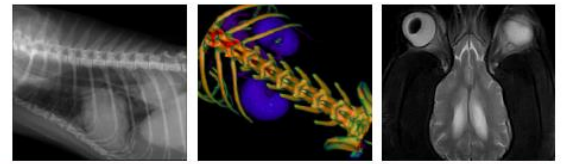
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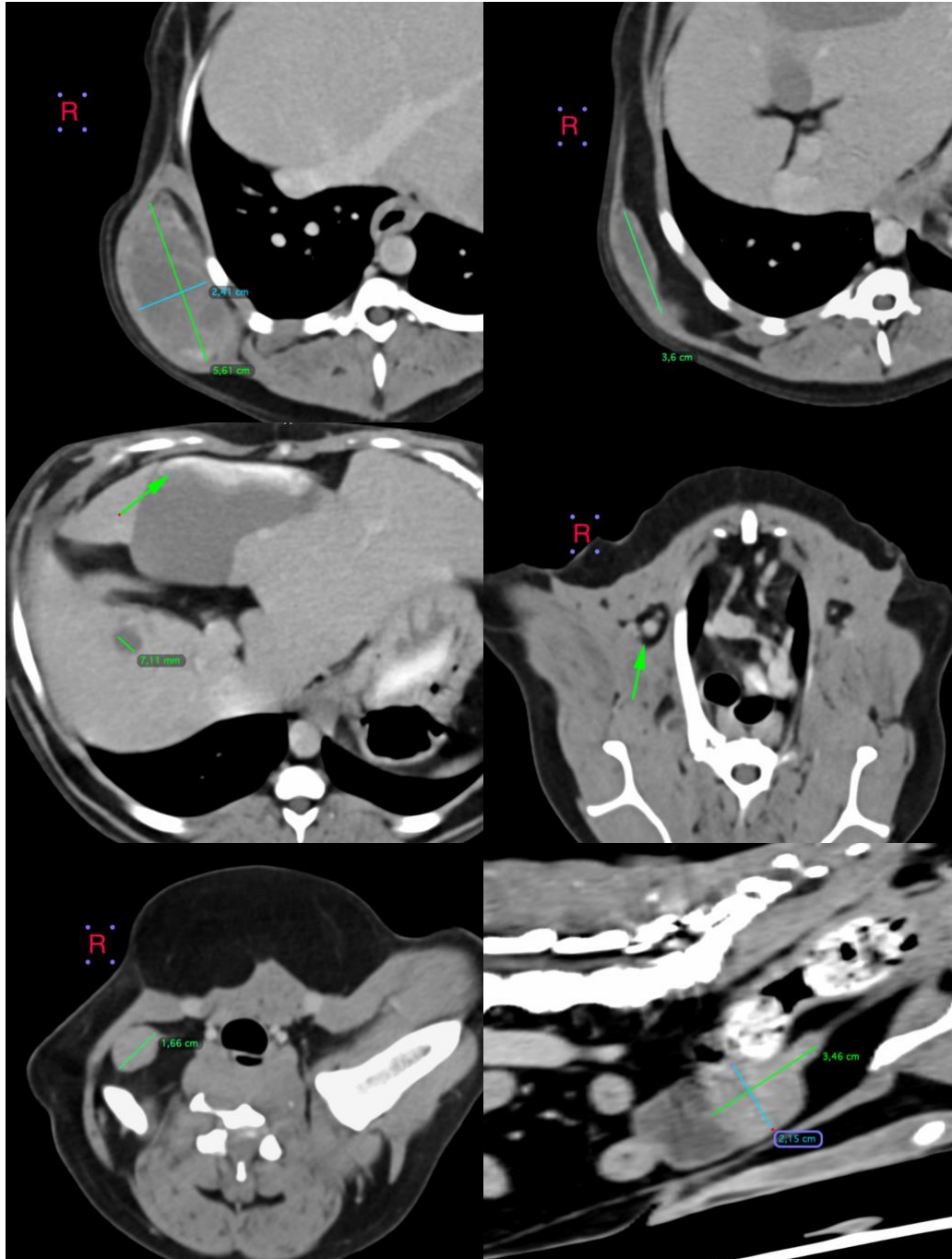
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Schnoodle

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