

PATIENT

Murphy Kelly

SPECIES

Canine

BREED

Goldendoodle

SEX

Neutered Male

AGE

8 Years 9 Months

WEIGHT

71

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Jenna/Emma

HOSPITAL NAME

Animal Clinic
Northview

REFERRING VET

Derek Howell, DVM

INVOICE

35451

DATE

11/7/25

PRESENTING CLINICAL SIGNS

History: Large Mass RHL - Suspect lipoma, r/o infiltrative vs circumscribed/encapsulated vs other Hx: FCE July 2024 Numerous SQ Growths - Suspect Lipomas Presented for CT of the mass on the RHL to see if viable for surgical removal.

COMPUTED TOMOGRAPHIC STUDY OF THE PELVIS

A high resolution pre- and post-contrast CT study of the pelvis is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The vertebral endplates of the lumbosacral junction present moderate spondylosis formation. The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately 40% of the cross-sectional area of the vertebral canal at the same level.

Both coxofemoral joints present mild to moderate osteophyte new bone formation.

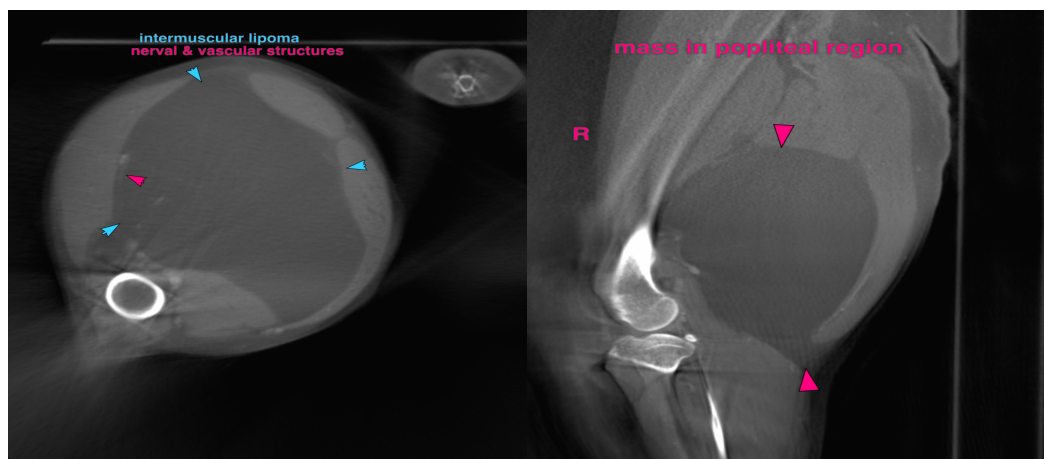
At the caudal aspect of the distal third of the diaphysis of the right femur and caudal aspect of the right gastrocnemius muscle, in the fascial plane between the semimembranosus and semitendinosus muscle, a well-defined, homogeneous fat attenuating mass is seen, measuring 8.7 x 9.0 x 10.0 cm. The fibularis and tibialis branch of the right sciatic nerve are coursing along the lateral and caudolateral surface of the fat attenuating mass.

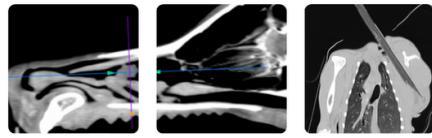
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intermuscular lipoma caudodistal aspect right thigh/popliteal region
- Osteoarthrosis coxofemoral joints due to hip dysplasia
- Intervertebral disc protrusion lumbosacral junction without compression of the cauda equina fibers
- Spondylosis deformans lumbosacral junction

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated mass in the right popliteal region is consistent with an intermuscular lipoma, I do not see signs of infiltrative growth. Complete surgical resection of the mass is considered feasible.





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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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com