



PATIENT

Mila Ferolito

SPECIES

Canine

BREED

Pit Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

32 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

JC

HOSPITAL NAME

Southern Oregon VSC

REFERRING VET

Dr. Fugazzi

INVOICE

35889

DATE

12/12/25

PRESENTING CLINICAL SIGNS

History: Referral for possible neck pain. Difficulty standing, sitting, laying. Ataxia. HX of dermal HSA removed earlier this year, and an episode of nystagmus. Physical Exam: Neuro - normal mentation, normal cranial nerves, difficulty walking especially with forelimbs. R stronger than L. Difficult to tell if it's actual weakness vs trying to avoid pain. normal proprioception, no overt ataxia but ambulation is abnormal. Normal anal tone.

COMPUTED TOMOGRAPHIC STUDY OF THE NECK

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

COMPUTED TOMOGRAPHIC FINDINGS

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. A small amount of soft tissue material is appreciated in the medial aspect of the external ear canals.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Centered on the left facet joint C7/T1 and the left lamina of T1 an ill-defined, uniform soft tissue attenuating and irregular mild contrast enhancing mass is seen – protruding into the vertebral canal level C7/T1 occupying approximately up to 75% of the cross-sectional area of the vertebral canal at the same level. The affected osseous structures present ill-defined permeative osteolytic lesions. The dural tube level C7/T1 is deviated to the right and compressed.

The remainder of the osseous and soft tissue structures of the neck are within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Polyostotic aggressive osteolytic lesions left facet joints and lamina C7/T1 with associated soft tissue mass and secondary compressive myelopathy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a soft tissue mass centered on the left dorsolateral aspect of C7 and T1 – presenting local aggressive osteolysis and invading the vertebral canal, the odds for metastasis of the excised hemangiosarcoma are high. Primary soft tissue neoplasia such as sarcoma or round cell tumor are potentials. The finding is a plausible explanation for the presenting clinical signs.



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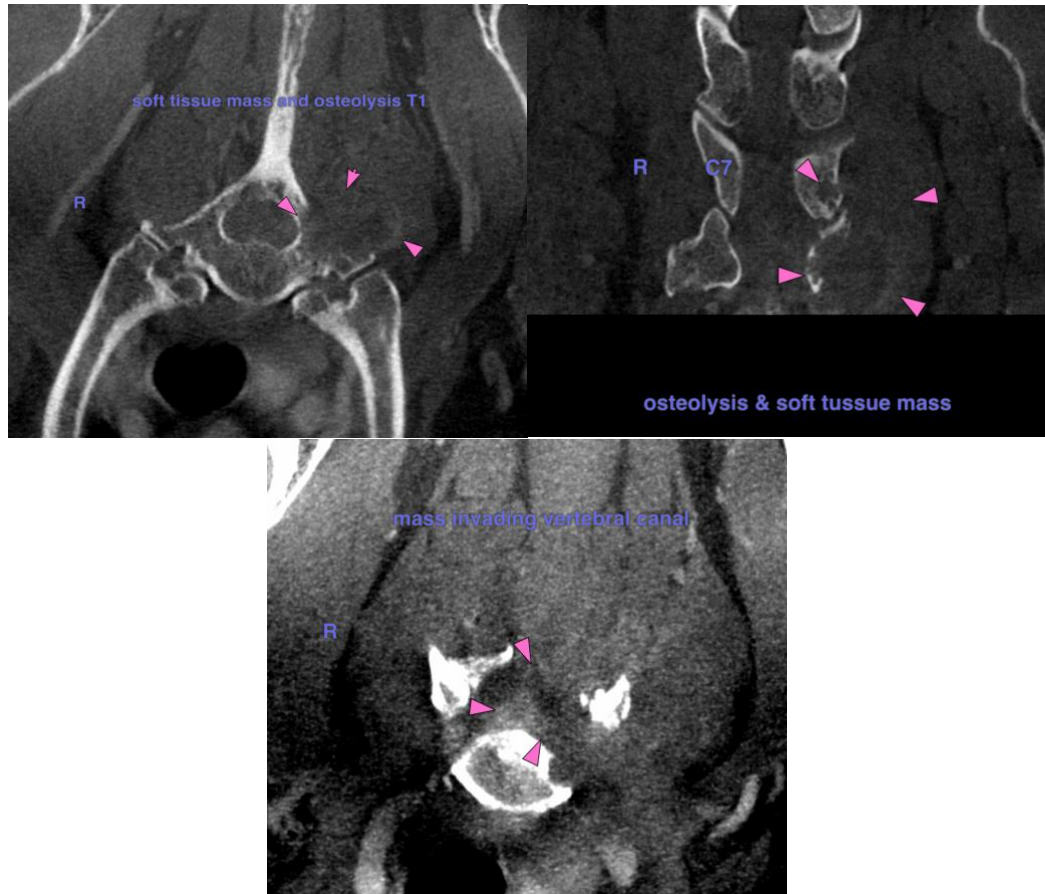
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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