



PATIENT

Brandy Noonan

SPECIES

Canine

BREED

Miniature Pinscher

SEX

Spayed Female

AGE

10

WEIGHT

15

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

WS

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

Dr. Lopez

INVOICE

72927

DATE

12-9-25

PRESENTING CLINICAL SIGNS

Hx of slow growing firm SQ mass in the ventral neck region, present for about 2 years. Measures approximately 2.5". FNA performed on Dec 4th showed epithelial cells, concerned for thyroid tumor. CT scan performed on 12/9 with results pending. Mass is very vascular, punch biopsies obtained.

COMPUTED TOMOGRAPHY OF THE SKULL, NECK, THORAX AND ABDOMEN

A high resolution pre- and post-contrast CT study of the neck and a plain CT study of the skull, thorax and abdomen are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull & Neck

The tooth elements 105,206, 306, 311, 406 and 411 are absent.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

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. The external ear canals are within normal limits.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The submandibular and left 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.

In the right retropharyngeal region, a uniform soft tissue attenuating and heterogeneous strong contrast enhancing, ovoid shaped mass is seen; measuring 4.3 x 3.8 x 6.0 cm. Multiple tortuous vessels are appreciated along periphery of the right retropharyngeal mass. In the craniodorsal aspect the mass is extending up to the level of the right tympanic bulla. The larynx is displaced to the left by the mass effect. The right medial retropharyngeal lymph node cannot be delineated from the mass. The right thyroid gland is seen at the caudomedial aspect of the right retropharyngeal mass and has the expected size, shape and attenuation behavior.

The left thyroid gland is unremarkable.

The remainder of the osseous and soft tissue structures of the neck reveal no abnormalities.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.



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The lung parenchyma presents the expected architecture and attenuation behavior with randomly distributed interspersed punctuate mineralization.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. A very small amount of mineral attenuating material is associated with the renal pelvis bilaterally.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large right retropharyngeal soft tissue mass with heterogeneous strong contrast uptake
- Multiple absent teeth
- No evidence of pulmonary metastatic disease
- Normal abdomen, but very mild nephrolithiasis versus nephrocalcinosis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The large retropharyngeal mass is consistent with primary soft tissue neoplasia – the most likely tumors are ectopic thyroid carcinoma or paraganglioma (carotid body tumor). Surgical resection can be tried – adhesions with the larynx may be present and there is a high risk for inadvertent laceration of the vagosympathetic trunk.

The CT study is negative for metastatic disease.



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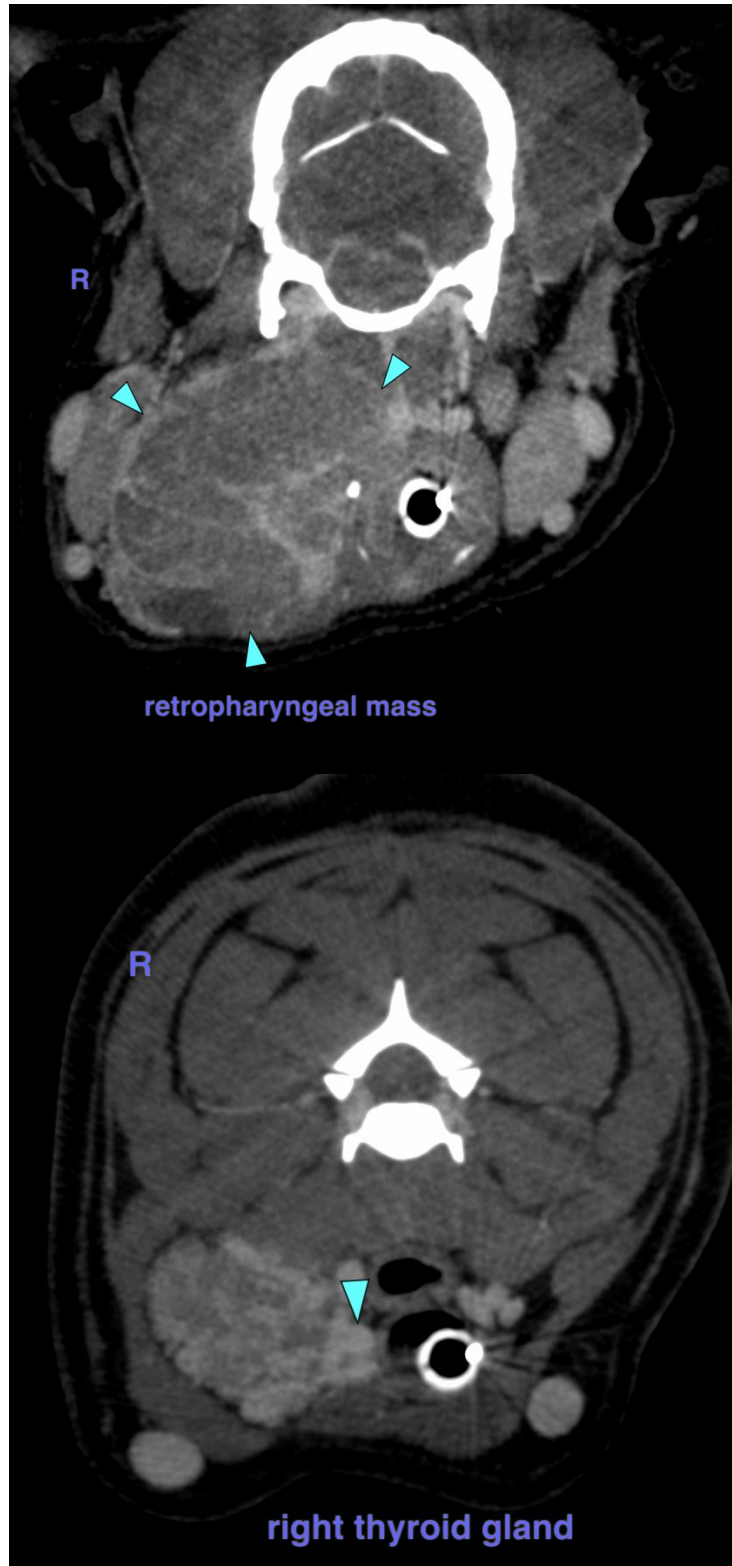
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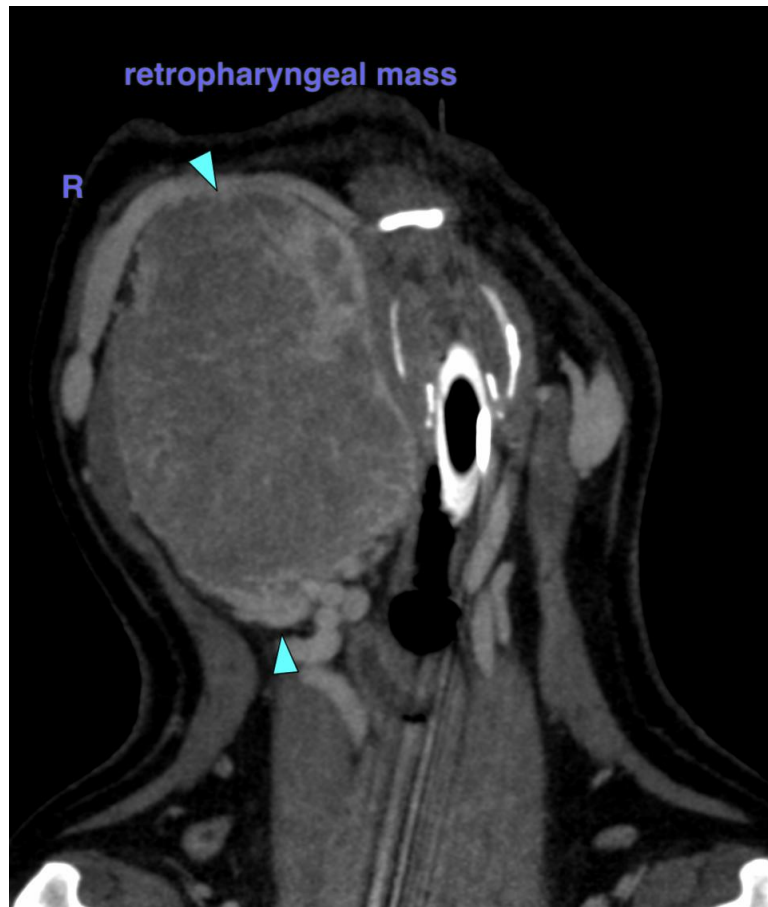
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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