



PATIENT

Floyd Cantili

SPECIES

Canine

BREED

Hound Mix

SEX

Neutered Male

AGE

10

WEIGHT

27.3

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Lisa

HOSPITAL NAME

ASC Oceanside

REFERRING VET

Dr. Infernuso

INVOICE

35836

DATE

2/13/26

PRESENTING CLINICAL SIGNS

- Grade 2 Sarcoma on rib cage recurrence since June 2024
- Left lateral thoracic mass 18x9x12 cm extending by the incision site

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

In the subcutaneous tissue at the left thoracic wall, level with 4th to 9th left rib, a multilobulated, well-defined, homogeneous contrast enhancing mass is seen; measuring 10.7 x 3.7 x 12.0 cm. Multiple small, isolated nodules are seen in the periphery of the subcutaneous soft tissue mass.

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

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands cannot be clearly delineated due to streak artefacts.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

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

- History of reoccurrence of subcutaneous soft tissue sarcoma left thoracic wall with multiple isolated nodules in the periphery of the mass



PATIENT

- No evidence of pulmonary metastatic disease
- Normal abdomen

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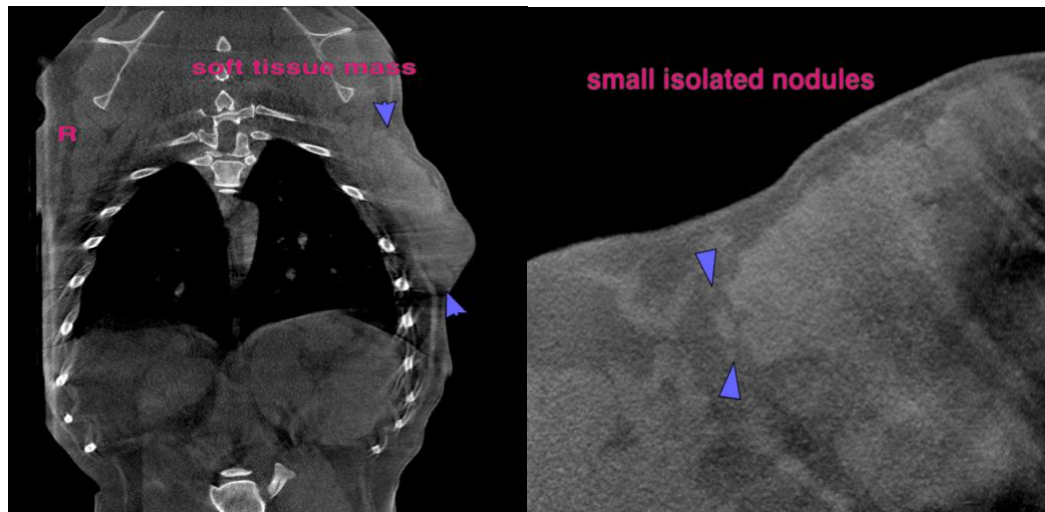
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are fitting the history of reoccurrence of soft tissue sarcoma at the left thoracic wall lateral to the latissimus dorsi muscle – surgical management appears feasible although there is a high inherent risk for local reoccurrence.



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