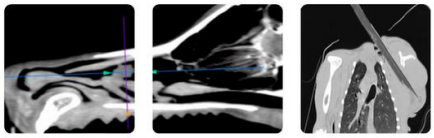

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Axon Porter

SPECIES

Ca

BREED

Husky

SEX

MN

AGE

8.5Y

WEIGHT

94lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Cassidi K - Logan T

HOSPITAL NAME

Animal Clinic
Northview

REFERRING VET

Randall V. Hutchison, DVM

INVOICE

73968

DATE

2-26-26

PRESENTING CLINICAL SIGNS

- Thorax
- SQ Mass on right ventral sternum
- evaluating for any evidence of invasion and thoracic structures

COMPUTED TOMOGRAPHY OF THE THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

In the subcutaneous tissue ventral to the 6th and 7th sternebra, an ill-defined, ovoid shaped, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is seen; measuring 7.5 x 3.6 x 3.2 cm. The mass merges with the caudal aspect of the right pectoral muscles.

The subcutaneous tissue caudal to the right shoulder joint presents an irregular soft tissue striation along with multiple well-defined soft tissue attenuating nodules – measuring up to 10 mm in diameter. Multiple punctuate mineralizations are appreciated throughout the soft subcutaneous soft tissue striation/nodules.

The axillary lymph nodes are moderately prominent and rounded.

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass caudoventral aspect of the sternum with local invasive growth
- Multiple soft tissue nodules along the craniolateral right thoracic wall with dystrophic mineralization
- Lymphadenopathy right axillary lymph nodes
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated soft tissue mass at the caudoventral thoracic wall is consistent with primary soft tissue neoplasia with likely local metastasis throughout the subcutaneous tissue along the right thoracic wall and right axillary lymph nodes – the top differential is (hemangio)sarcoma.

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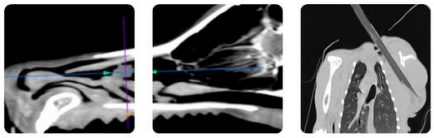

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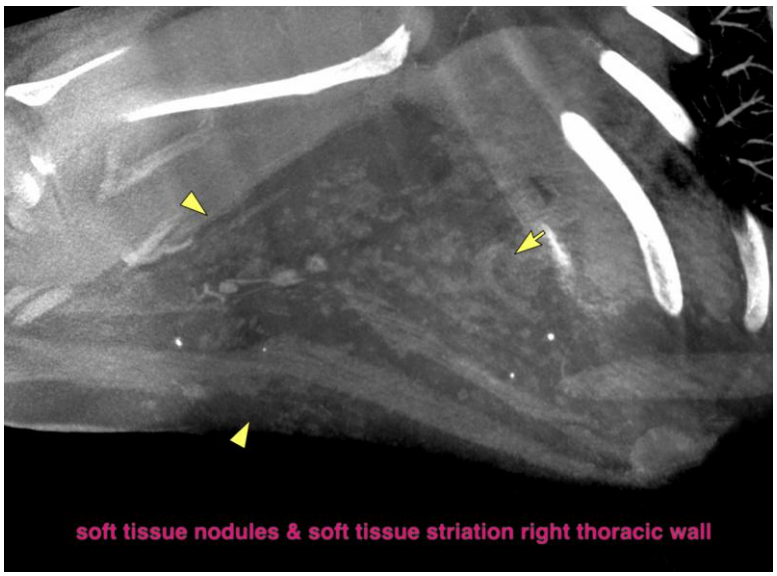

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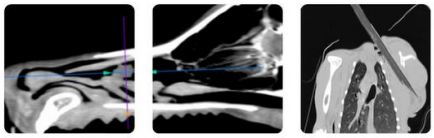

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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