



## PATIENT

Junior Chu

## SPECIES

Canine

## BREED

Chihuahua Mix

## SEX

Neutered Male

## AGE

8 Years 6 Months

## WEIGHT

17.3

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

## IMAGING PERFORMED BY

Branson Kitterman

## HOSPITAL NAME

Scottsdale Veterinary  
Clinic

## REFERRING VET

Dr. Gans

## INVOICE

14342

## DATE

03/13/26

## PRESENTING CLINICAL SIGNS

- weight loss over last 6 months ~ 4 lbs, 2.5 cm by 3 cm firm mass near submandibular lymph nodeventral to mass 3 cm by 3 cm firm SQ mass on left neck 1.5 cm by 2 cm mass on right neck just right to trachea
- masses appear cavitated on ultrasound

## COMPUTED TOMOGRAPHIC STUDY OF THE NECK AND THORAX

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

## COMPUTED TOMOGRAPHIC FINDINGS

### Neck

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 left medial retropharyngeal lymph node is significantly enlarged, rounded and has a heterogeneous strong contrast enhancement pattern; measuring 3.4 x 2.7 x 6.2 cm. Multiple tortuous vessels are seen in the periphery of the left medial retropharyngeal lymph node.

Originating from the left thyroid gland, a well-defined, ovoid shaped, uniform soft tissue attenuating and heterogeneous strong contrast enhancing mass is seen; measuring 3.6 x 3.0 x 4.6 cm. The left common carotid artery is deviated dorsally by the mass effect. At the caudal aspect of the left thyroid mass, two well-defined, nodules are seen – measuring up to 1.2 cm – that present the same attenuation pattern as the left thyroid soft tissue mass.

### 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 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, with randomly distributed interspersed punctuate mineralization.

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

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left thyroid soft tissue mass along with two isolated nodules at the caudal pole – no evidence of vascular invasion
- Well-vascularized soft tissue mass left medial retropharyngeal lymph node



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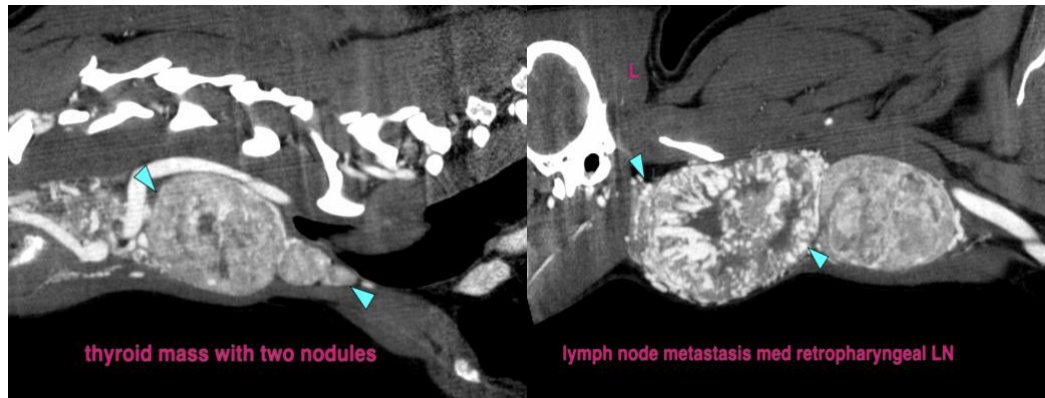
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- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated masses along the left aspect of the neck are consistent with primary thyroid neoplastic transformation – thyroid carcinoma is most common – and a large lymph node metastasis in the left medial retropharyngeal lymph node. Discussing surgical management options with surgeon & oncologist is beneficial.



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  
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