



PATIENT

Suki Staney

PRESENTING CLINICAL SIGNS

Patient History for Suki Staney Presenting Complaint: Suki presented with large mass on the right shoulder and lameness. When did you first notice the problem? 5 weeks Has Suki had any previous history of this? No Does the patient have any underlying conditions?? Not that they are aware of. Has Suki had any diagnostics or procedures Radiographs at the rdvm. How has Suki's appetite been? Normal When did Suki last eat? This morning. Have you noticed any vomiting, diarrhea, urinary concerns, coughing, or any other abnormal signs? No If so, when did you first notice these? #INPUT# Are you currently giving Suki any medications or supplements? Codeine, Gabapentin, Vetprofen.

SPECIES

Canine

BREED

Catahoula Mix

COMPUTED TOMOGRAPHY OF THE THORAX/FRONT LIMBS

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

SEX

FS

COMPUTED TOMOGRAPHIC FINDINGS

Centered on the right scapula, a large, peripherally contrast enhancing mass measuring 11.8 x 8.3 x 7.3 cm in size is visible. The associated part of the scapular presents moth eaten osteolytic lesions. The right axillary lymph node is prominent, homogenous soft tissue attenuating and contrast enhancing.

AGE

3 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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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Center

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.

REFERRING VET

Dr. Fugazzi

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass centered on the right scapula with semiaggressive osteolytic lesions of the right scapula
- Lymphadenopathy right axillary lymph node
- No evidence of pulmonary metastatic disease

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with the history of a soft tissue mass associated with the right scapula – sarcoma is the top differential. The odds for metastatic spread to the right axillary lymph node are high. FNA sampling of the mass can be used as advanced diagnostic test – including the right axillary lymph node. Complete surgical excision of the mass by scapulectomy ± limb sparing is considered as a feasible treatment option.

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3-2-22



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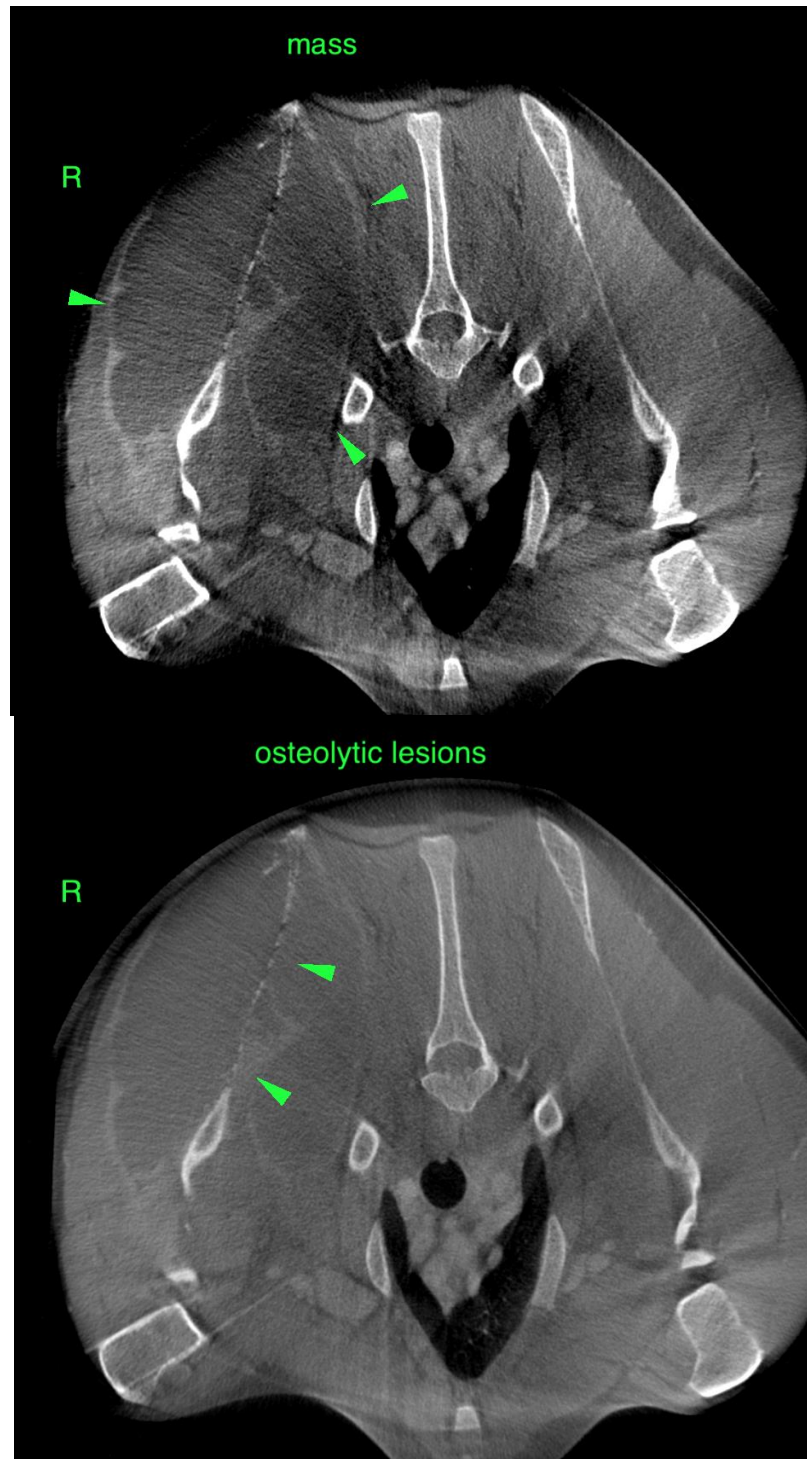
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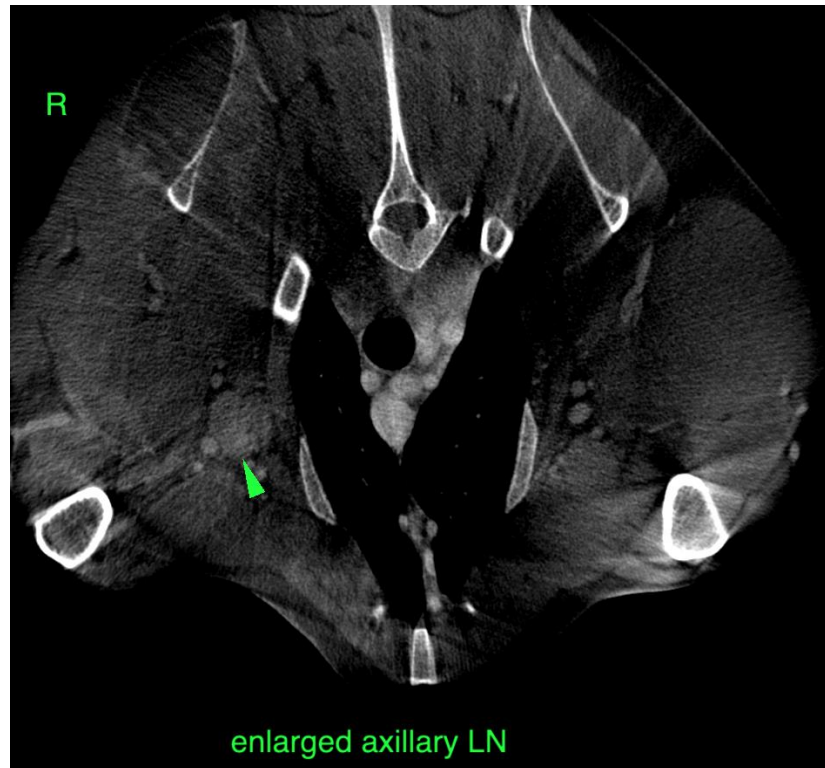
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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