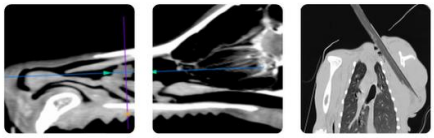

PATIENT
Midas Still

SPECIES
Canine

BREED
Spoodle

SEX
MN

AGE
5

WEIGHT
10

INTERPRETED BY
Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY
Eamon

HOSPITAL NAME
Belconnen Veterinary Centre

REFERRING VET
Eamon

INVOICE
74552

DATE
4-13-26

PRESENTING CLINICAL SIGNS

right fore surgical planning lipoma removal
Abnormal PE/Chem/CBC/UA Results: cbc/chem pending

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

In the right axillary region, merging with the right pectoral muscles, an ovoid shaped, irregular fat attenuating mass with interspersed feathered soft tissue striation is seen; measuring 5.7 x 7.0 x 16.8 cm. The fat attenuating mass is extending caudally up to the level of the costal cartilage of hte4 8th right rib and cranially up to the caudal aspect of the right brachium. The large axillary vessels and nerval structures of the brachial plexus are mildly deviated dorsally by the mass effect.

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

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

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

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.

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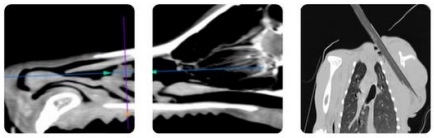

Teleradiology
Educational Teleconsultation Services™

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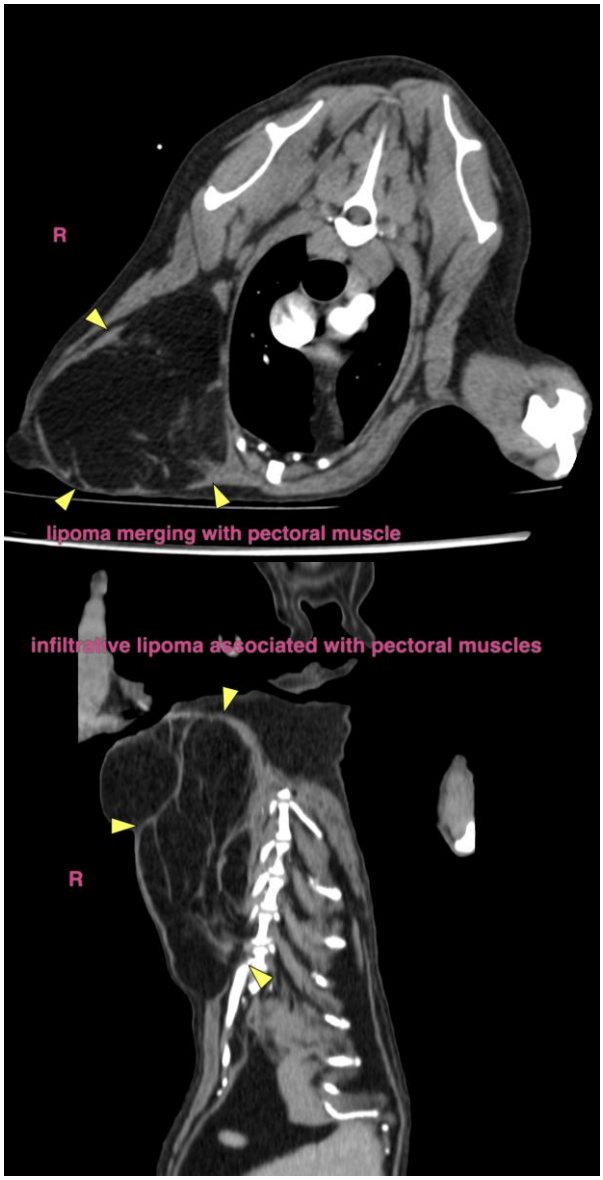
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Infiltrative lipoma right axillary region/right ventrolateral thoracic wall – blending with the right pectoral muscles
- No evidence of pulmonary metastatic disease
- Normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are consistent with infiltrative lipoma – invading the origin of the pectoral muscles along the ventrolateral aspect of the thoracic wall. Although benign in nature the infiltrative behavior of the lipoma is increasing the odds for local reoccurrence – the chances of adjuvant radiation therapy may be discussed with oncologist.



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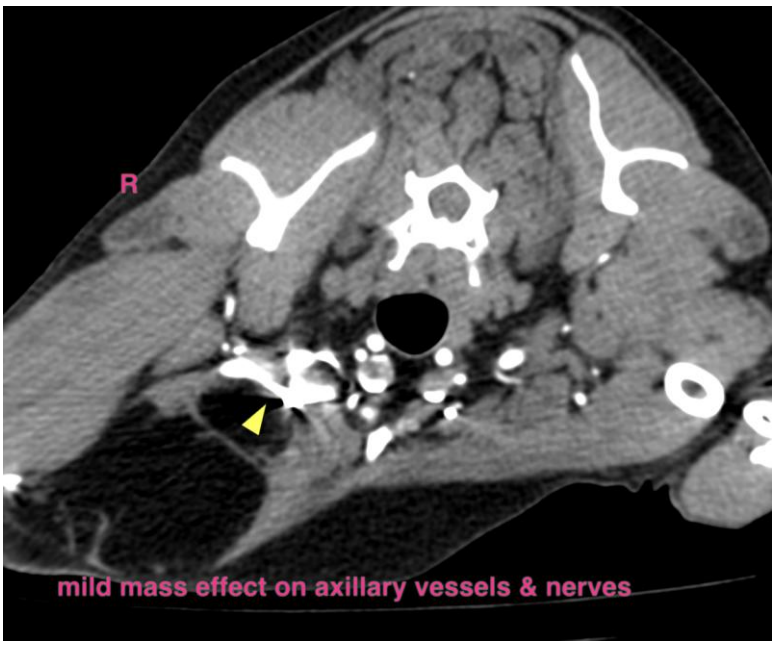

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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