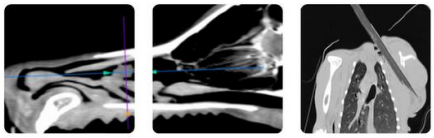

PATIENT

Nala Hawkley

SPECIES

Canine

BREED

Labrador Retriever

SEX

Female Spayed

AGE

8Y

WEIGHT

32.8kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

LAN

HOSPITAL NAME

Southern Oregon Veterinary Specialty Center

REFERRING VET

Dr. Emily Riddle

INVOICE

74637

DATE

4-16-26

PRESENTING CLINICAL SIGNS

Progressive soft tissue mass growing in size significantly over the last 2 months, extending over the right brachium and axillary region. Evaluate for surgical resection and metastasis to thoracic cavity.

COMPUTED TOMOGRAPHY OF THE THORAX AND RIGHT SHOULDER JOINT

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

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

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, but zones with dystelectasis accentuated of the left lung.

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

Shoulder joints

Medial to the right scapula, a fat attenuating mass with interspersed soft tissue striation – blending with the surrounding muscles – is appreciated; measuring approximately 14.8 x 9.7 x 16.8 cm. The mass is extending cranially in the prescapular region along the right caudolateral aspect of the neck. The right scapula is abducted by the mass effect. The axillary vessels and nerval structures and the caudal segment of the right jugular vein are deviated ventrally by the fat attenuating mass. In the subcutaneous tissue in the periphery of the mass, multiple small gas attenuating areas and fluid pockets are visible.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large infiltrative lipoma right subscapular region
- Surrounding emphysema and small fluid pockets due to preceding surgical intervention
- No evidence of pulmonary metastatic spread

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are consistent with infiltrative lipoma in the right subscapular region – merging with the medial scapular muscles. Complete surgical resection may warrant amputation of the front limb, the chances of cytoreductive surgery and adjuvant radiation therapy may be discussed with oncologist alternatively. Incomplete resection of the mass is likely to result in reoccurrence.

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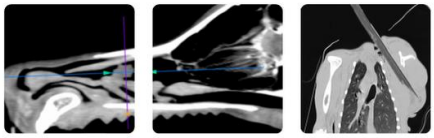

Teleradiology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

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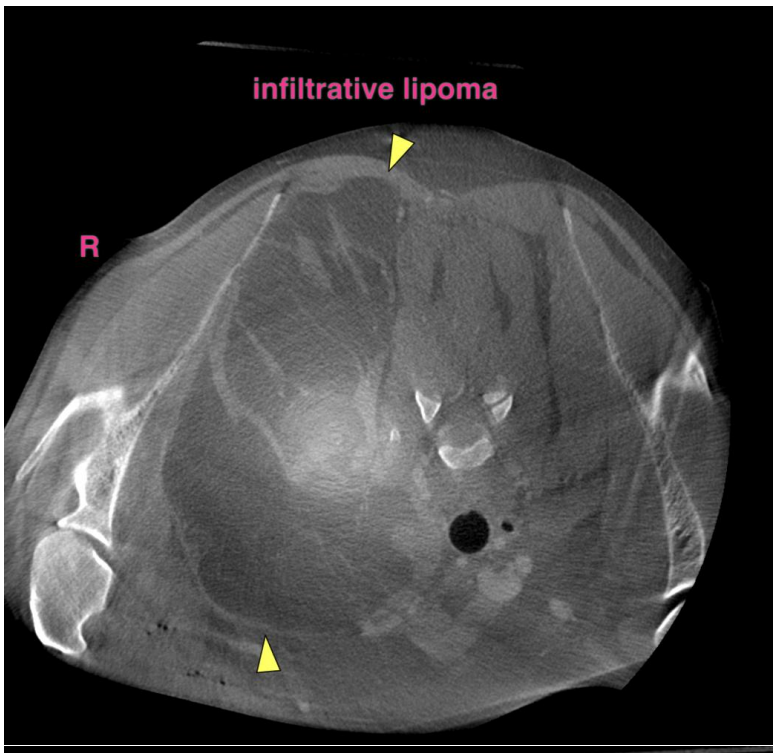

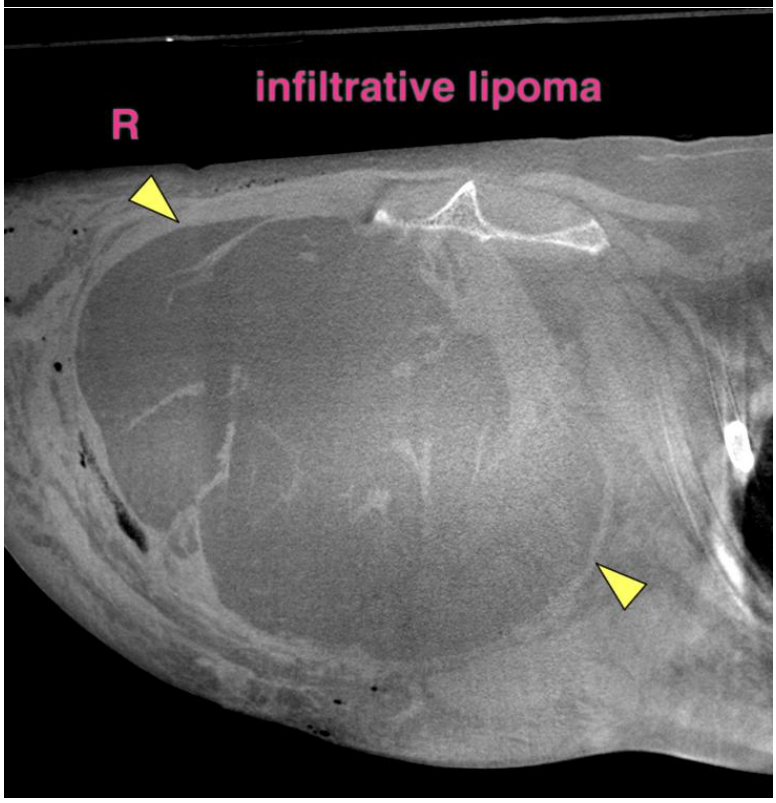

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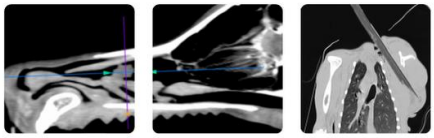

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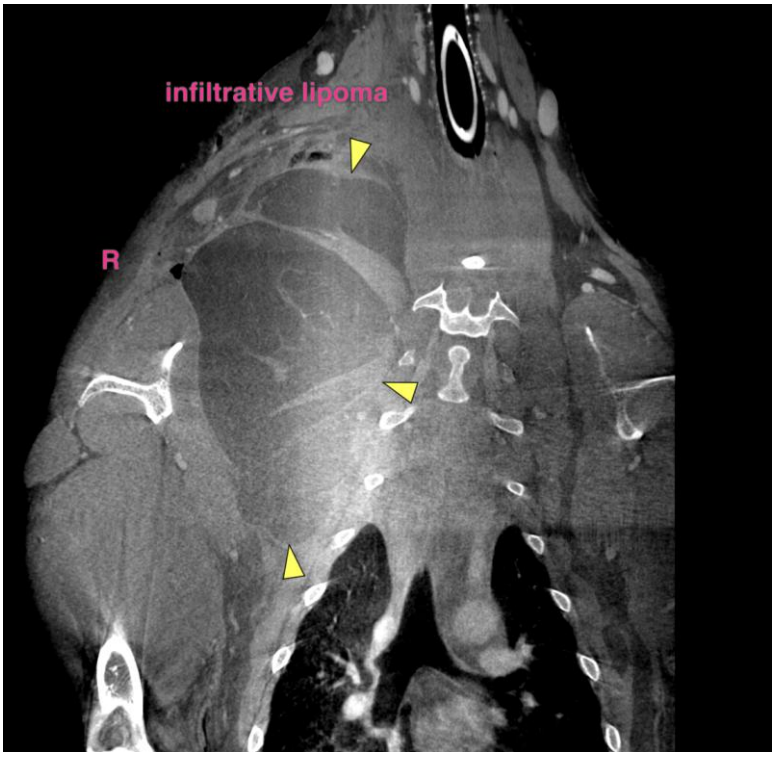

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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