



PATIENT PRESENTING CLINICAL SIGNS

Jax Holte Primary veterinarian referred P for CT to determine how invasive mass on thorax/axillary area is prior to surgical removal. Fine needle aspirate on the mass on 11/4/22 came back as a lipoma. O is concerned that the mass may be hindering the P ability to walk, they have noticed a limp on the L forelimb.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THORACIC LIMBS AND CRANIAL THORAX

BREED

Labrador Retriever

A pre- and post-contrast CT study of the thoracic limbs and cranial thorax are provided for review totaling two series. One pre-contrast series and one post contrast, transverse, soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

MN

AGE

7 Years, 7 Months

A large, multilobulated, subcutaneous, fat opaque, and homogeneously attenuating mass is seen within the left axillary topographic region. The mass is located between different thoracic and axillary muscles; the muscles adjacent to the mass are the latissimus dorsi muscle, pectoralis profundus muscles, scalenus dorsalis and scalenus medius. The mass displaces and stretches the axillary vessels, such as the axillary artery, axillary vein, and subscapular vein. Also, there is a moderate to severe reduction in the luminal diameter of these vessels, because of the mass compression. The cranial portion of the axillary mass protrudes cranially in the ventral cervical region and add to another fat subcutaneous mass that is between the sternocephalic muscle and Pectorallis ascendants muscle. It is difficult to make an accurate measurement due to the disformed characteristics of the mass, however, it measures approximately 12.1cm x 10.6cm x 9.2cm.

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

The left axillary lymph node is moderately enlarged, homogeneously enhanced, and measures approximately 1.4cm x 1.9cm.

The left shoulder joint is normal. The proximal left humerus, scapula, and ribs are normal.

The cervical spine is unremarkable.

HOSPITAL NAME

Casselton Vet Service

The collimated thoracic structures are normal.

The collimated portion of the pulmonary parenchyma is normal. No evidence of soft tissue attenuating nodules.

REFERRING VET

Laurie Huckle

The collimated mediastinal lymph nodes are normal.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INVOICE

57885

DATE

4-19-23

- Large, left-sided axillary and adjacent thoracic wall lipoma.
- The extensive size of the axillary mass compresses, displaces, and reduces the luminal volume of the correspondent vessels of the ipsilateral thoracic limb.
- Left axillary lymphadenitis, reactive.
- Normal collimated thorax.
- Normal collimated cervical spine.



PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Jax Holte The tomographic characteristics of the axillary mass indicate a lipoma and was correlated with the fine-needle aspirate report. The mass is extensive in size and is between the adjacent thoracic and axillary muscles. We can detect external compression and displacement of the correspondent vessels; compression of the innervation is possible, and that could explain the history of the lameness or the mass volume.

SPECIES

Canine No evidence of left shoulder osteoarthritis.

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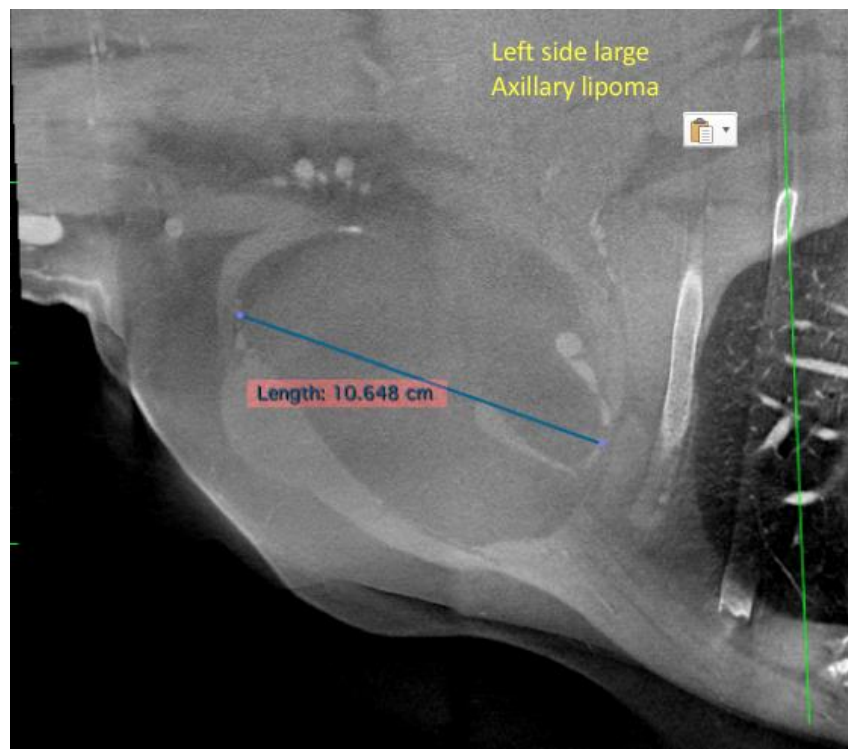
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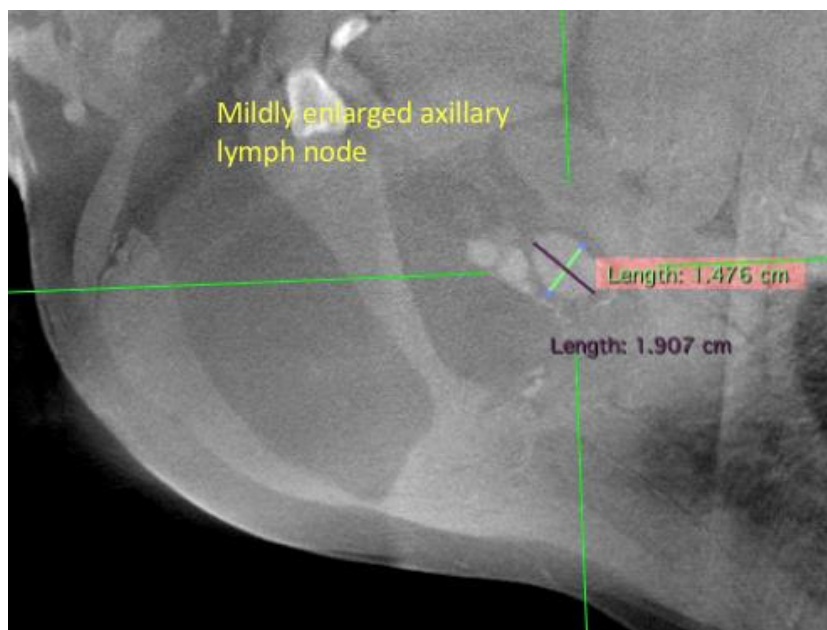
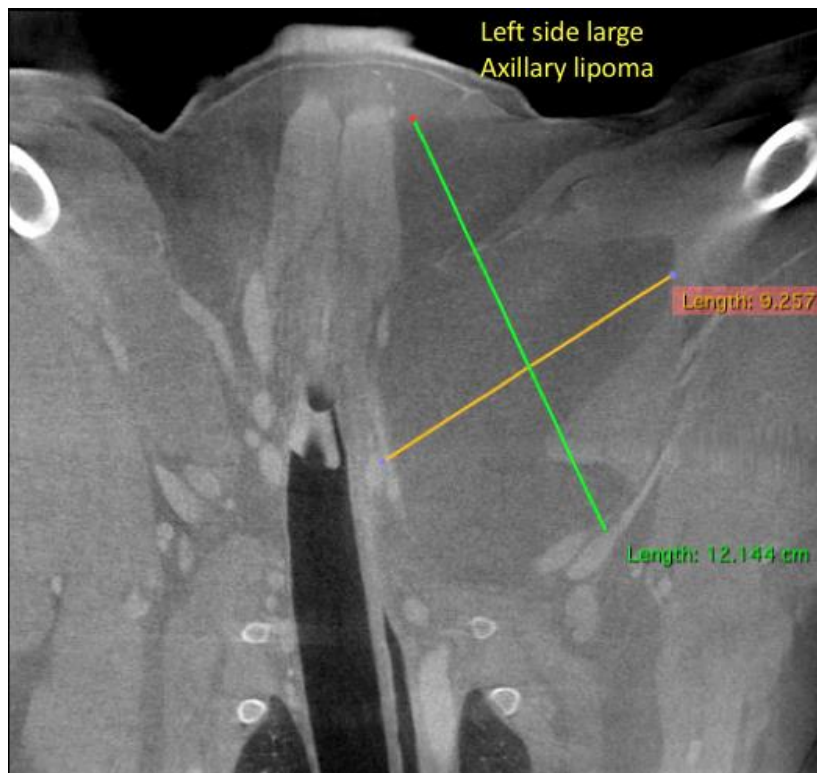
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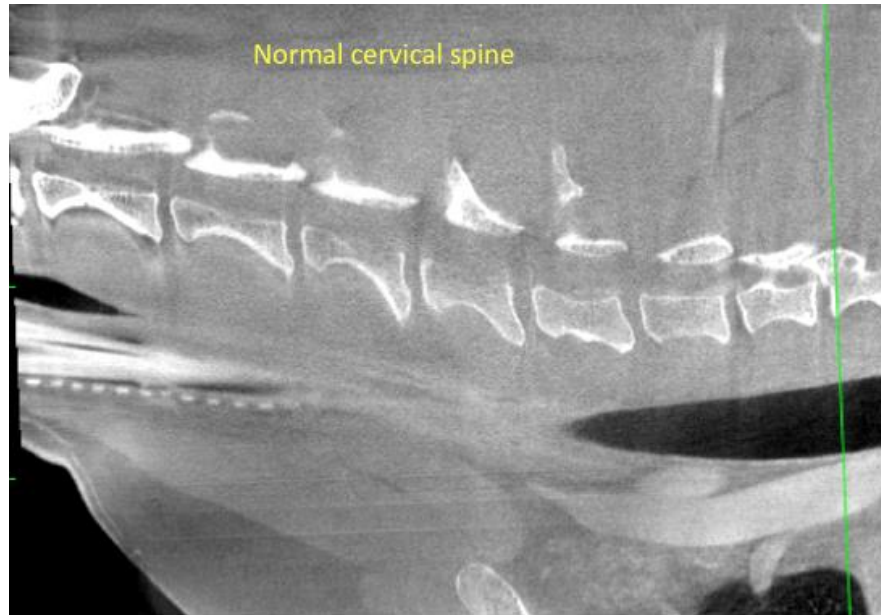
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

HOSPITAL NAME

Casselton Vet Service

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com

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