



## PATIENT

Yippe Nguyen

## SPECIES

Rabbit

## BREED

Dwarf

## SEX

Neutered Male

## AGE

5 Years

## WEIGHT

3.2 lbs

## INTERPRETED BY

Alicia Angosto  
Guerrero, DMV,  
PgDip, MSc.

## IMAGING PERFORMED BY

Heidi Putnam, LVT

## HOSPITAL NAME

East Padden Animal  
Hospital

## REFERRING VET

Dr. Rowley

## INVOICE

71857

## DATE

11/15/25

## PRESENTING CLINICAL SIGNS

Presents for change in respiratory pattern. - increased respiratory effort with nasal flare and intermittent abdominal effort for breathing

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The bladder lumen is moderately distended. The wall of the urinary bladder appears thin and smooth. The cloudy appearance of the urine is due to normal calcium excretion. The pelvic urethra and ureteral papillae appear normal. There are no calculi and no evidence of inflammatory or neoplastic changes.

The left kidney has a normal shape and size, measuring 2.48×1.30 cm, with a cortical thickness of 0.21 cm in the sagittal plane.

The right kidney has a normal shape and size, measuring 2.50×1.39 cm, with a cortical thickness of 0.22 cm in the sagittal plane.

The cortex is isoechoic in comparison to the normal liver parenchyma. The cortex-to-medulla ratio is within normal limits, and the corticomedullary differentiation is preserved. The renal sinus appears hyperechoic, as expected in rabbits. There is no evidence of pyelectasis, nephrolithiasis, or hydronephrosis.

### *Adrenal Glands*

The adrenal glands are uniform in size and contour, with uniformly hypoechoic parenchyma. The left adrenal gland measures 0.24 cm at the cranial pole and 0.29 cm at the caudal pole. The right adrenal gland is 0.30 cm.

### *Spleen*

4.32 mm in diameter, with normal sonographic appearance.

### *Liver*

The liver appears subjectively normal in size, structure, and contour. The parenchyma is uniform and hypoechoic compared to the spleen, with a normal echotexture. No hepatic lymphadenopathy is observed. Dilatation of hepatic veins and caudal vena cava is present.

The gallbladder lumen is moderately distended. The wall is thin, and the luminal content appears primarily anechoic. The cystic and common bile ducts are not dilated.

### *Gastrointestinal*

The stomach is distended with a food pattern. It exhibits a normally thickened wall (body: 0.11 cm, pylorus: 0.22 cm) and a normal layering pattern. The small intestine has a normal thickness (0.13 cm) and presents intact wall layering. The lumen of the small intestine is empty, with no signs of ileus, obstruction, or foreign material.



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The cecum shows a normal, very thin wall (0.32 mm) and completely normal contents. Sacculus rotundus: normal appearance and content. Wall thickness: 1.92 mm. Appendix: wall thickness 1.68–1.97 mm, normal content.

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The distal colon has a normal wall (0.3 mm) with formed feces present in the lumen.

### **Pancreas**

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Not visualized.

### **Free Abdomen**

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The evaluation of the peritoneal cavity reveals no abdominal effusion, peritonitis, or lymphadenomegaly.

### **Thoracic Cavity**

## AGE

5 Years

An intrathoracic mass is observed adjacent to the right cardiac chambers and at the exit of the great vessels into the mediastinum. The size of the mass is very difficult to determine, but it is estimated to be at least 4×2 cm, likely larger. Mild/initial pleural effusion is present.

## WEIGHT

3.2 lbs

### **PRIMARY FINDINGS**

- Large cranial mediastinal mass located adjacent to the right cardiac chambers and extending toward the great vessels; size difficult to fully determine sonographically. Apparent early pleural effusion.

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### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The intrathoracic mass identified adjacent to the right cardiac chambers and the great vessels, together with the presence of early pleural effusion and increased respiratory effort, is highly suggestive of a thymoma. This diagnosis is particularly plausible given that thymomas are well-recognized in middle-aged to older rabbits and frequently present with progressive respiratory signs.

## IMAGING PERFORMED BY

Heidi Putnam, LVT

Additionally, the mass's location and mass effect raise concern for partial cranial vena cava compression, a mechanism classically associated with episodic or persistent exophthalmos in affected rabbits. Taken together, the imaging features and the patient's clinical presentation align closely with a thymoma as the primary underlying pathology.

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The GI measurements are unequivocally normal. The thickened areas the referring team saw are simply normal sacculus rotundus and appendix, which are unique to rabbits and often misinterpreted as pathology. *Sacculus rotundus* measured: 1.92 mm (0.192 cm). Normal range: 0.22 ± 0.06 cm. Appendix measured: 1.68–1.97 mm (0.168–0.197 cm). Normal range: Study 1: 0.19 ± 0.04 cm, study 2: 0.8–2.2 mm (mean 1.51 mm).

## INVOICE

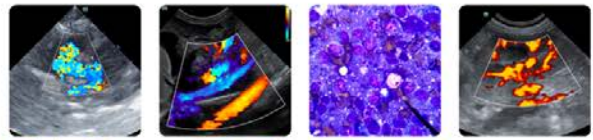
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Recommendations:

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- Check for exophthalmos (strong supporting sign for thymoma due to venous obstruction).



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- Thoracic CT scan (optional). Best modality to confirm mediastinal origin, evaluate extent, and plan treatment.
- FNA of the thoracic mass (pending).





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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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

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