



PATIENT

Little Miss Barton

PRESENTING CLINICAL SIGNS

Started coughing and gagging a few weeks ago. Was spayed and had a mammary mass removed and those signs were not present at that time. Patient has started with coughing and gagging again and is now making gurgling noises as well.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Elevated Values-RBC-11.28M/uL, Hematocrit-71.3%, Hemoglobin-24.9 g/dL, RDW-24.9%, Reticulocytes-123.0 K/uL, WBC-18.16K/uL, Neutrophils - 16.31 K/uL, Lymphocytes-0.85 K/uL, Globulin-4.6 g/dL

BREED

Australian Shepherd

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, NECK, & THORAX

Plain and post contrast studies of the head and neck and plain study of the thorax available for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Spayed Female

Head & Neck

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

AGE

13 Years, 1 Month

Thin and smoothly folded conchae and turbinates with even smooth mucosal lining.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external auditory meatuses present within normal limits.

HOSPITAL NAME

Neel Veterinary
Hospital

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

The salivary glands present within normal limits.

REFERRING VET

Dr. Deepan Kishore

The visible dentition is within normal limits.

Moderate dilation of the esophagus with a moderate amount of fluid and gas is seen throughout the entire neck.

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Thorax

The bony and surrounding soft tissue structures are within normal limits.

DATE

10-11-21

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 are uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.



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A large approximately 5.0 x 3.0 cm sized soft tissue attenuating mass is seen within the cranial mediastinum. The trachea is shifted towards the right side. The esophagus is deviated and compressed. Lesion margins cannot be accurately delineated owing to the lack of a post-contrast study. However, the entire cranial mediastinum appears to be occupied by the soft tissue mass.

SPECIES

Canine

A moderate alveolar lung pattern with cranial and ventral distribution is seen in the cranial lung lobes and left caudal lung lobe.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Cranioventral mediastinal soft tissue mass.
- Esophageal dilation.
- Cranial and ventral alveolar lung pattern.

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SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a cranioventral mediastinal soft tissue mass. Differential diagnosis includes thymoma, thymic lymphoma, cranial mediastinal lymphoma, and less likely other neoplastic and non-neoplastic masses. Owing to the concurrent presence of megaesophagus, thymoma is a primary potential. However, final diagnosis will require sampling for cytology or histology. The lesion should be well accessible with ultrasound through the cranial thoracic aperture or using a parasternal intercostal approach.

AGE

13 Years, 1 Month

The findings of the lung are highly suggestive for aspiration pneumonia.

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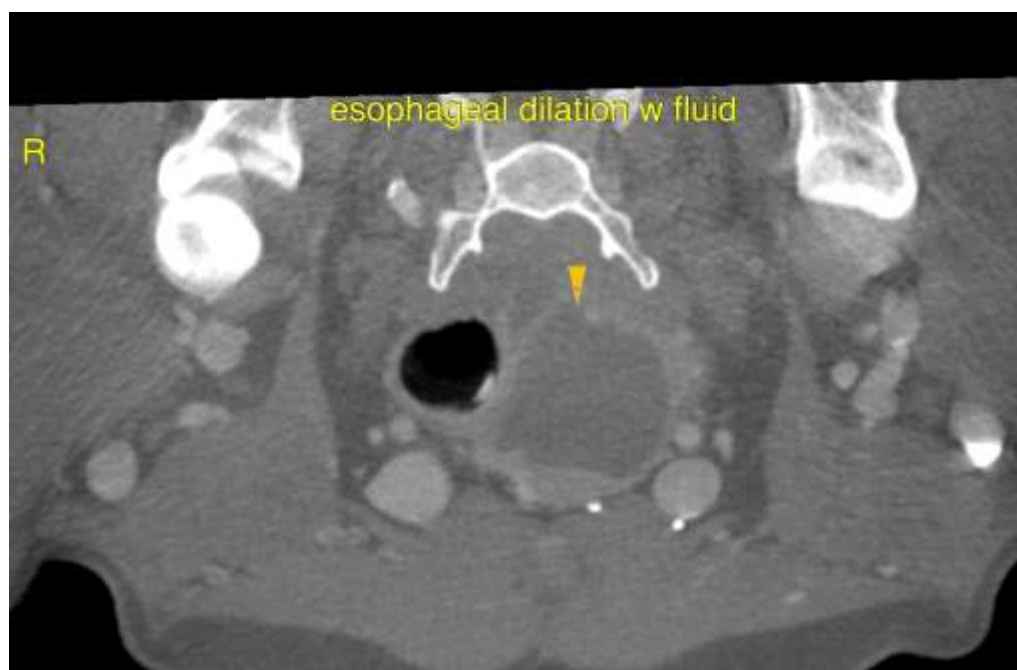
Dr. Deepan Kishore

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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.

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