



PATIENT

Dagny Jakubowski

PRESENTING CLINICAL SIGNS

Pet presented on 3/9/23 with a vague history of decreased appetite, lethargy and labored breathing, especially on exhalation. PE revealed pet was mildly febrile (104.0), and had a mildly increased ALP. Chest films revealed pleural effusion. Abdominal ultrasound was unremarkable. Thoracic ultrasound revealed a mass in the cranial thorax, possibly in the mediastinum. Pet was anesthetized and FNA of the mass was attempted. Results attached, but non specific. C/S was no growth. A CT was advised to better assess for possible biopsy &/or removal

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

BREED

Lab X

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

71

The CT study reveals an ovoid approximately 10 x 7.5 cm sized soft tissue mass within the cranial and ventral mediastinum. The lesion margins are ill-defined. The mass comprises tissue components which are mainly in the periphery of the mass and large contrast sparing fluid attenuating center. Nodular protrusions emerge from the surface of the mass and are ill-defined too. Mild caudal and dorsal deviation of the heart and carina is seen.

AGE

9 Years, 3 Months

There is mild residual pleural and mediastinal effusion accentuating the right hemithorax.

The lung lobe margins are slightly retracted from the thoracic wall and rounded. Mild viscera pleura thickening is seen. There is no evidence of interstitial pulmonary nodules or masses.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large cranioventral mediastinal soft tissue mass with “cystic” component.
- Mild pleural and mediastinal effusion.

HOSPITAL NAME

Wilson Veterinary Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a large cranioventral mediastinal soft tissue mass which comprises tissue components accentuating the peripheral of the mass and large fluid filled centers are seen in the center of the mass which are likely to represent cystic components of a tumor as well as central tumoral necrosis. Differential diagnosis includes neoplasia such as cranial mediastinal lymphoma, thymoma, thymic lymphoma, or ectopic thyroid tumor primarily. Granuloma, hematoma, and cyst cannot be ruled out entirely but are thought highly unlikely in this case. Sampling the mass is unlikely to be rewarding in the lesion center as to the large fluid filled central compartments of the mass. Ultrasound guided sampling using a right parasternal ventral intercostal approach should offer the best acoustic window and highest diagnostic yield to harvest cells or tissue cylinders by means of either fine needle aspiration or core biopsy.

REFERRING VET

Dr. Amy Hawkins

INVOICE

57379

DATE

3-22-23



PATIENT

Dagny Jakubowski

SPECIES

Canine

BREED

Lab X

SEX

71

AGE

9 Years, 3 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

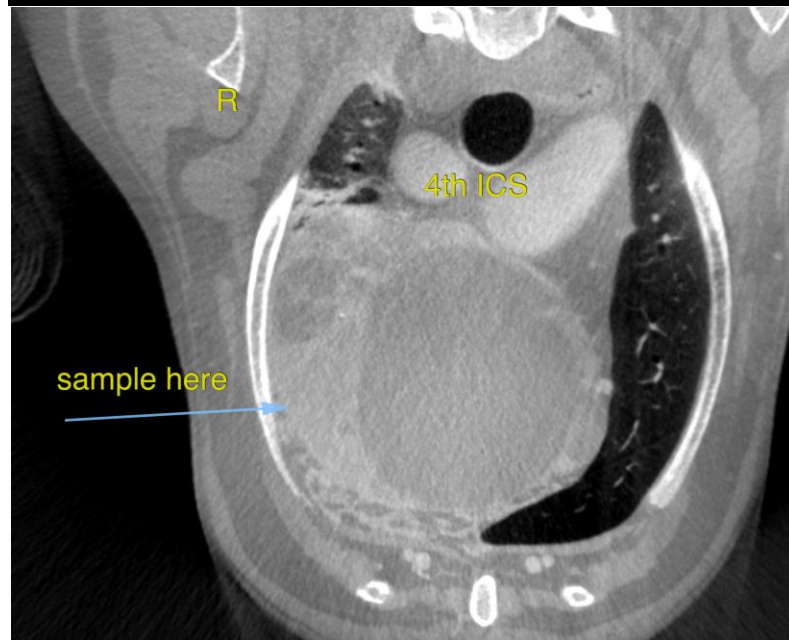
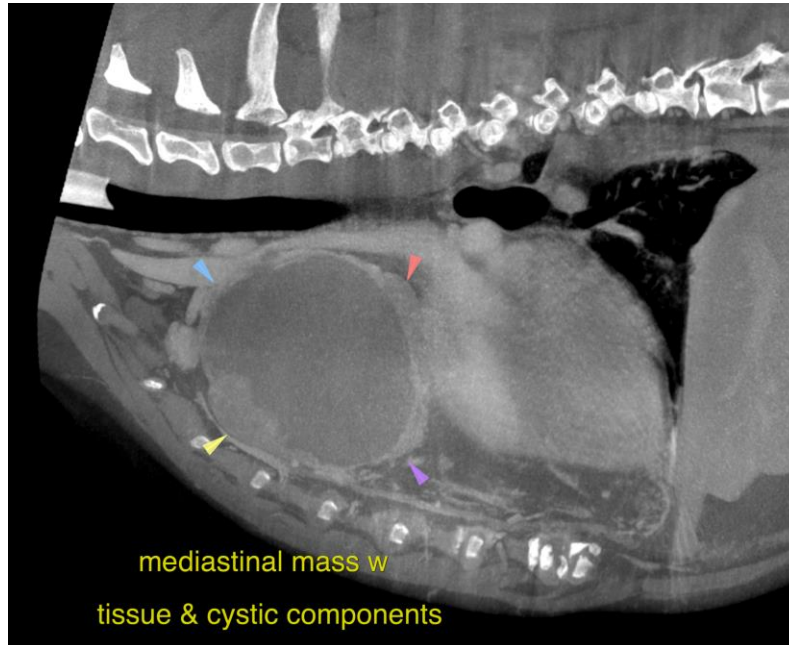
Dr. Amy Hawkins

INVOICE

57379

DATE

3-22-23





PATIENT

Dagny Jakubowski

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.

SPECIES

Canine

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com

BREED

Lab X

SEX

71

AGE

9 Years, 3 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Amy Hawkins

INVOICE

57379

DATE

3-22-23