



PATIENT

Scout Spies

PRESENTING CLINICAL SIGNS

Scout presented for a cranial mediastinal mass rule out lymphoma,
Abnormal PE/Chem/CBC/UA Results: Neu high lym low mchc high glucose high

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Post-contrast study available for review.

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

A large cranioventral soft tissue mass with lobulated appearance and nonuniform contrast enhancement is seen. The mass measures approximately 7.5 cm in length and 4.0 cm in width and occupies the entire cranial mediastinum. Severe caudal deviation of the lung and heart is seen. The trachea and esophagus as well as the large mediastinal vessels are deviated dorsally. The mediastinal lymph nodes cannot be seen separate from the mass.

SEX

FS

Mild bilaterally symmetric pleural effusion is seen in the dependent dorsal aspect of the pleural cavities.

AGE

12 Years

The assessment of the lung is limited by the presence of multiple streak artifacts, however, no evidence of pulmonary nodules or masses is seen. There appears to be a multifocal peribronchial interstitial infiltrate.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large mediastinal soft tissue mass meeting neoplastic criteria.
- Mild bilaterally symmetric pleural effusion.
- Multifocal peribronchial pattern.

HOSPITAL NAME

Animal Surgical
Center

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Differential diagnosis for the mediastinal soft tissue mass includes lymphoma, thymic lymphoma, thymoma, and less likely ectopic thyroid carcinoma or other soft tissue neoplasia. Final diagnosis will require histology. Ultrasound guided fine needle aspiration using a cranial thoracic parasternal intercostal approach or through the cranial thoracic aperture could be considered for further definition. No overt vascular invasion or peripheral tissue infiltration was seen. The resectability of the mass; however, may be limited by its large size and anatomic extent.

REFERRING VET

Dr. Infernuso

The CT study did not reveal evidence of pulmonary nodules or masses. A multifocal peribronchial infiltrate was seen which may be explained by pulmonary dystelectasis however, lower airway disease and atypical presentation of metastatic disease cannot be ruled out entirely.

INVOICE

51144

The pleural effusion was mild and is likely to represent paraneoplastic effusion, effusion secondary to altered pressure relationships, or carcinomatosis. Correlate with the laboratory results.

DATE

3-24-22



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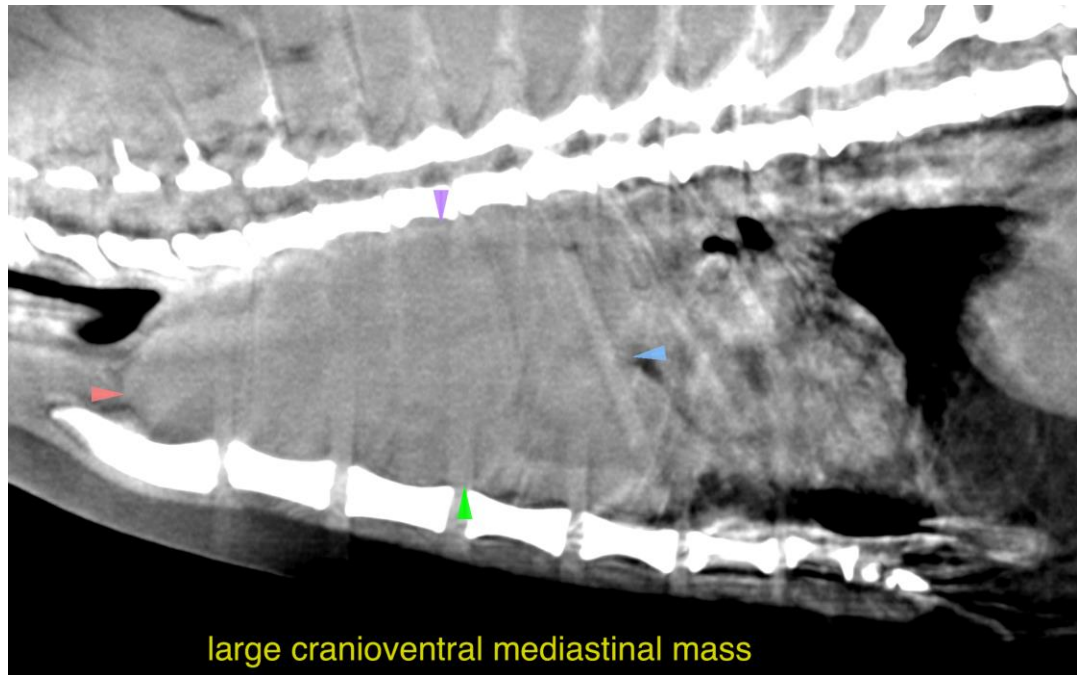
DSH

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AGE

12 Years



large cranioventral mediastinal mass

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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.

HOSPITAL NAME

Animal Surgical
Center

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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REFERRING VET

Dr. Inferuso

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