



**PATIENT PRESENTING CLINICAL SIGNS**

Max Rivera Hx of traumatic accident and presented to er. For post trauma evaluation. Radiograph showed pleural effusion. Tfast showed mass cranial to the heart.  
 Abnormal PE/Chem/CBC/UA Results: muffled heart sounds, otherwise patient is bar and not showing any clinical signs of respiratory dz

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX**

Plain and post contrast studies in soft tissue and lung windows available for review.

**BREED**

Pointer

**COMPUTED TOMOGRAPHIC FINDINGS**

A moderate amount of pleural effusion is seen ventrally within both pleural cavities.

**SEX**

Male

The lung lobes are retracted from the thoracic wall and present rounded margins.

A ventrally accentuated interstitial increase in pulmonary attenuation is seen throughout all lung lobes. A focal dorsal interstitial infiltrate is seen in the mediiodorsal aspect of the left caudal lung lobe.

**AGE**

4

Multiple severe mediastinal lymphadenomegaly is noted. The cranial mediastinal lymph nodes are enlarged at a diameter of approximately 10 cm and present heterogeneous enhancement with multifocal cavitations. A mass effect onto the caudal vena cava and right atrium is noted. The precarinal tracheobronchial lymph nodes measure 4 cm in diameter and present similar enhancement and cavitation. The tracheobronchial lymph nodes are rounded and measure 2 cm in diameter.

**INTERPRETED BY**

Nele Eley, DVM  
 Dr. med. Vet. DipECVDI

The portal and epigastric lymph nodes appear to be enlarged as well.

A hypoenhancing nodule is seen within the included portion of the spleen.

**HOSPITAL NAME**

Juana Diaz Animal  
 Hospital

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Moderate bilaterally symmetric pleural effusion.
- Severe multiple mediastinal lymphadenomegaly meeting neoplastic criteria.
- Mass effect onto the cranial vena cava and milder mass effect onto the right atrium.
- Ventral peripheral interstitial infiltrate of the lung.
- Portal and epigastric lymphadenomegaly.
- Splenic nodule.

**REFERRING VET**

Jose Rivera

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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The CT findings are highly suggestive for multiple mediastinal lymphadenomegaly. Mediastinal lymphoma or histiocytic sarcoma is considered a primary differential diagnosis. Other cranial mediastinal mass such as thymic lymphoma, thymoma, ectopic thyroid neoplasia, or soft tissue sarcoma cannot be ruled out entirely but is by far less likely. Final diagnosis will require sampling. Ultrasound guided FNA of the large cranioventral mediastinal mass could be considered.

**DATE**

7-12-23

The pulmonary infiltrates are very likely to represent atelectasis however a diffuse infiltrate with round cells cannot be ruled out entirely.



**PATIENT**

Max Rivera

The pleural effusion may represent transudate, modified transudate, or exudate. Paraneoplastic effusion is considered most likely. Transudate secondary to right sided congestive cardiac failure in association with the mass effect onto the right atrium is considered a minor potential. Further definition by means of aspiration and analysis of the fluid is recommended if not performed already.

**SPECIES**

Canine

The findings of the cranial abdomen suggest potential involvement of the portal and epigastric lymph nodes as well as of the spleen. Abdominal ultrasound and guided FNA could be considered for further definition.

**BREED**

Pointer

There are no specific signs supporting the theory of trauma induced pathology on this patient.

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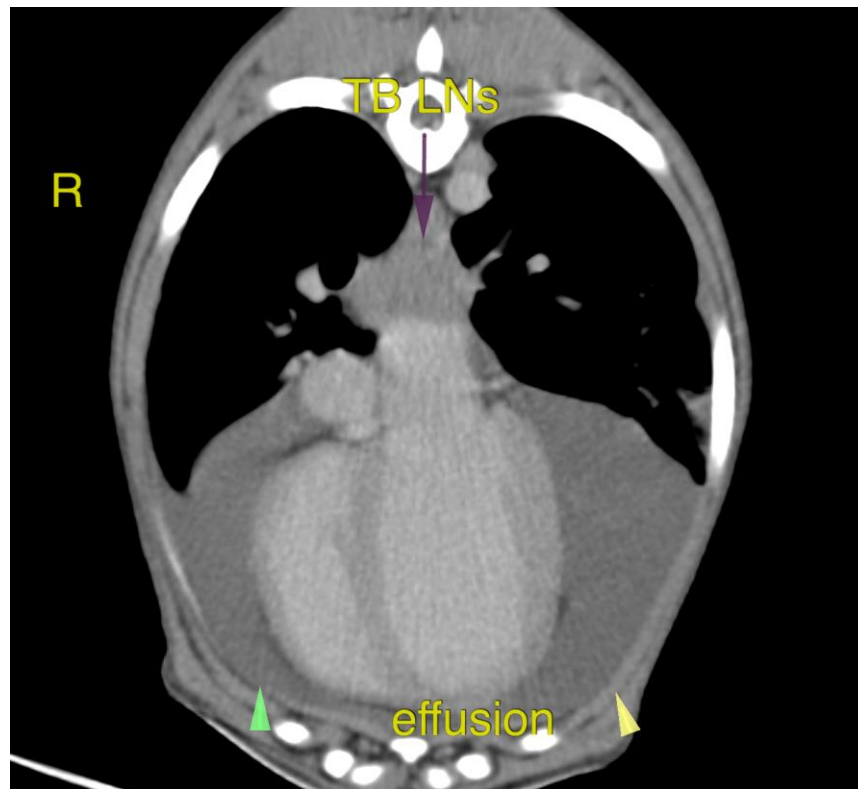
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**PATIENT**

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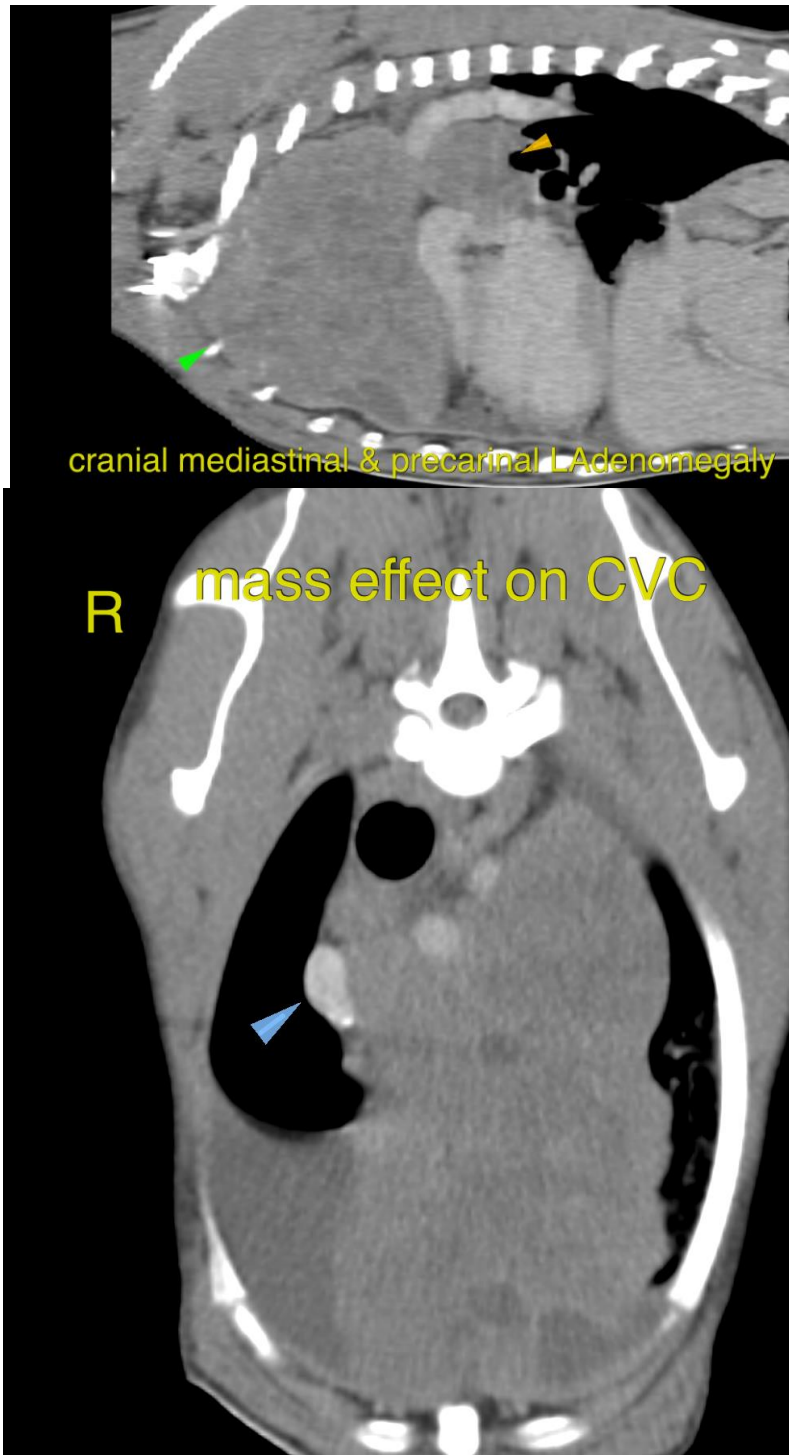
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**PATIENT**

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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.

**SPECIES**

Canine

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